

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 Congressional Progressive Caucus PAC

ADDRESS (number and street) PO Box 33079 Washington DC 20033 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE 3. IS THIS REPORT NEW (N) OR AMENDED (A) C C00513176 X

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 02 / 01 / 2024 through 02 / 29 / 2024

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 Tinsmon, Cassandra, , ,

Signature of Treasurer Tinsmon, Cassandra, , , Date 03 / 20 / 2024

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

SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Congressional Progressive Caucus PAC

Report Covering the Period: From: 02 / 01 / 2024 To: 02 / 29 / 2024

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2024		1089087.79
(b) Cash on Hand at Beginning of Reporting Period.....	1049314.17	
(c) Total Receipts (from Line 19) .....	211435.40	319286.46
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	1260749.57	1408374.25
7. Total Disbursements (from Line 31).....	163478.94	311103.62
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	1097270.63	1097270.63
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> 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 the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE  
of Receipts

Write or Type Committee Name

Congressional Progressive Caucus PAC

Report Covering the Period: From: 02 / 01 / 2024 To: 02 / 29 / 2024

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).....	27632.46	39882.46
(ii) Unitemized .....	132742.86	218343.92
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	160375.32	258226.38
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	51000.00	61000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	211375.32	319226.38
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).....	60.08	60.08
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)).....▶	211435.40	319286.46
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	211435.40	319286.46

**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 .....	135534.46	282594.14
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	135534.46	282594.14
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	25000.00	25000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	2944.48	3509.48
(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)).....	2944.48	3509.48
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	163478.94	311103.62
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	163478.94	311103.62

**DETAILED SUMMARY PAGE**  
of Disbursements

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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) .....	211375.32	319226.38
34. Total Contribution Refunds (from Line 28(d)) .....	2944.48	3509.48
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	208430.84	315716.90
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	135534.46	282594.14
37. Offsets to Operating Expenditures (from Line 15, page 3).....	60.08	60.08
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	135474.38	282534.06

**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 72
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Congressional Progressive Caucus PAC**

**A. Acelor, Charles, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1717 N Bayshore Dr  
 Apt 2355  
 City Miami State FL Zip Code 33132-1160  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 470.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 05 / 2024  
**Transaction ID : 22785641**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**B. Acelor, Charles, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1717 N Bayshore Dr  
 Apt 2355  
 City Miami State FL Zip Code 33132-1160  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 470.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 12 / 2024  
**Transaction ID : 22814549**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**C. Acelor, Charles, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1717 N Bayshore Dr  
 Apt 2355  
 City Miami State FL Zip Code 33132-1160  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 470.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 19 / 2024  
**Transaction ID : 22865432**  
 Amount of Each Receipt this Period  
 20.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	170.00
<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 7 OF 72
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A. Acelor, Charles, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1717 N Bayshore Dr  
Apt 2355

City Miami State FL Zip Code 33132-1160

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

Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
470.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 19 / 2024

**Transaction ID : 22865475**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. Acelor, Charles, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1717 N Bayshore Dr  
Apt 2355

City Miami State FL Zip Code 33132-1160

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

Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
470.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 29 / 2024

**Transaction ID : 22927467**

Amount of Each Receipt this Period  
50.00

Memo Item

**C. Al Talib, Khalid, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 Timberpark Ct

City Lutherville State MD Zip Code 21093-1111

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

Name of Employer (for Individual) MKG PA Occupation (for Individual) Physician

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 12 / 2024

**Transaction ID : 22814736**

Amount of Each Receipt this Period  
125.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	225.00
<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:	PAGE 8 OF 72
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Al Talib, Khalid, , ,

Mailing Address 1 Timberpark Ct

City Lutherville	State MD	Zip Code 21093-1111
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MKG PA	Occupation (for Individual) Physician
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 19 / 2024

**Transaction ID : 22864977**

Amount of Each Receipt this Period  
100.00

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Alazraie, Tariq, , ,

Mailing Address 1670 Adobe Dr

City Pacifica	State CA	Zip Code 94044-4047
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Bay area safe alternatives	Occupation (for Individual) President
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
375.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 12 / 2024

**Transaction ID : 22814733**

Amount of Each Receipt this Period  
125.00

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Alazraie, Tariq, , ,

Mailing Address 1670 Adobe Dr

City Pacifica	State CA	Zip Code 94044-4047
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Bay area safe alternatives	Occupation (for Individual) President
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
375.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 12 / 2024

**Transaction ID : 22814734**

Amount of Each Receipt this Period  
125.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	350.00
<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 72
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Alazraie, Tariq, , ,**

Mailing Address 1670 Adobe Dr

City Pacifica	State CA	Zip Code 94044-4047
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Bay area safe alternatives	Occupation (for Individual) President
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
375.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	12	/	2024

**Transaction ID : 22814735**

Amount of Each Receipt this Period  
125.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Alimanestianu, Irina, , ,**

Mailing Address 108 Halsey Ave

City Southampton	State NY	Zip Code 11968-3414
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self-Employed	Occupation (for Individual) Artist
--	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	05	/	2024

**Transaction ID : 22785301**

Amount of Each Receipt this Period  
250.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Apone, James, , ,**

Mailing Address PO Box 242213

City Anchorage	State AK	Zip Code 99524-2213
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1132.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	12	/	2024

**Transaction ID : 22813958**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	475.00
<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:	PAGE 10 OF 72
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Apone, James, , ,**

Mailing Address **PO Box 242213**

City <b>Anchorage</b>	State <b>AK</b>	Zip Code <b>99524-2213</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) <b>N/A</b>	Occupation (for Individual) <b>Not Employed</b>
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Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1132.00**

Date of Receipt  
**02 / 19 / 2024**

**Transaction ID : 22864477**

Amount of Each Receipt this Period  
**1000.00**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Apone, James, , ,**

Mailing Address **PO Box 242213**

City <b>Anchorage</b>	State <b>AK</b>	Zip Code <b>99524-2213</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) <b>N/A</b>	Occupation (for Individual) <b>Not Employed</b>
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Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1132.00**

Date of Receipt  
**02 / 19 / 2024**

**Transaction ID : 22865446**

Amount of Each Receipt this Period  
**16.00**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Ard, Tom, , ,**

Mailing Address **827 N Marion St**

City <b>Oak Park</b>	State <b>IL</b>	Zip Code <b>60302-1532</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) <b>N/A</b>	Occupation (for Individual) <b>Not Employed</b>
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Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
**270.00**

Date of Receipt  
**02 / 12 / 2024**

**Transaction ID : 22815946**

Amount of Each Receipt this Period  
**5.00**

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>1021.00</b>
<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 11 OF 72
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Ard, Tom, , ,

Mailing Address 827 N Marion St

City Oak Park	State IL	Zip Code 60302-1532
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
270.00

Date of Receipt  
02 / 19 / 2024  
**Transaction ID : 22866833**

Amount of Each Receipt this Period  
15.00

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Ard, Tom, , ,

Mailing Address 827 N Marion St

City Oak Park	State IL	Zip Code 60302-1532
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
270.00

Date of Receipt  
02 / 19 / 2024  
**Transaction ID : 22866833**

Amount of Each Receipt this Period  
50.00

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Ard, Tom, , ,

Mailing Address 827 N Marion St

City Oak Park	State IL	Zip Code 60302-1532
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
270.00

Date of Receipt  
02 / 19 / 2024  
**Transaction ID : 22866840**

Amount of Each Receipt this Period  
15.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	80.00
<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:	PAGE 12 OF 72
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Ard, Tom, , ,

Mailing Address 827 N Marion St

City Oak Park	State IL	Zip Code 60302-1532
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 26 / 2024

**Transaction ID : 22928152**

Amount of Each Receipt this Period  
15.00

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Ard, Tom, , ,

Mailing Address 827 N Marion St

City Oak Park	State IL	Zip Code 60302-1532
------------------	-------------	------------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 26 / 2024

**Transaction ID : 22928233**

Amount of Each Receipt this Period  
5.00

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Ard, Tom, , ,

Mailing Address 827 N Marion St

City Oak Park	State IL	Zip Code 60302-1532
------------------	-------------	------------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 26 / 2024

**Transaction ID : 22928663**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	45.00
<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 13 OF 72
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A. Ard, Tom, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 827 N Marion St  
 City Oak Park State IL Zip Code 60302-1532  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 26 / 2024  
**Transaction ID : 22928676**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**B. Arpey, Conor, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 20 Crommelin Dr  
 City Saratoga Springs State NY Zip Code 12866-2844  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SUNY ACC Occupation (for Individual) Professor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 19 / 2024  
**Transaction ID : 22865512**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Blaustein, Edgar, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 40 Ackerman Pl  
 City Nyack State NY Zip Code 10960-2106  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 12 / 2024  
**Transaction ID : 22814544**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	505.00
<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:	PAGE 14 OF 72
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Briggs, Eleanor, , ,**

Mailing Address **86 Kings Hwy**

City <b>Hancock</b>	State <b>NH</b>	Zip Code <b>03449-5115</b>
------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) <b>Self-Employed</b>	Occupation (for Individual) <b>Photographer</b>
---	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1000.00**

Date of Receipt  
**02 / 05 / 2024**

**Transaction ID : 22785299**

Amount of Each Receipt this Period  
**1000.00**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Catlin, Faith, , ,**

Mailing Address **PO Box 183**

City <b>Lyme</b>	State <b>NH</b>	Zip Code <b>03768-0183</b>
---------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) <b>N/A</b>	Occupation (for Individual) <b>Not Employed</b>
---	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1000.00**

Date of Receipt  
**02 / 19 / 2024**

**Transaction ID : 22865503**

Amount of Each Receipt this Period  
**1000.00**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Chatterje, Nithiananda, , ,**

Mailing Address **57 Dover Grn**

City <b>Staten Island</b>	State <b>NY</b>	Zip Code <b>10312-1705</b>
------------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) <b>N/A</b>	Occupation (for Individual) <b>Not Employed</b>
---	--

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
**0.00**

Date of Receipt  
**02 / 05 / 2024**

**Transaction ID : 22785697**

Amount of Each Receipt this Period  
**1000.00**

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>3000.00</b>
<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 15 OF 72
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Coleman, Stephen, , ,**

Mailing Address 1732 Euclid St NW

City Washington	State DC	Zip Code 20009-2810
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Washington Parks & People	Occupation (for Individual) Community Park Revitalization
--	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 19 / 2024

**Transaction ID : 22864481**

Amount of Each Receipt this Period  
250.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Cone, Richard, , ,**

Mailing Address 210 W 90th St  
Ph 4

City New York	State NY	Zip Code 10024-1244
------------------	-------------	------------------------

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

Name of Employer (for Individual) Mucommune	Occupation (for Individual) President
--	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 19 / 2024

**Transaction ID : 22865510**

Amount of Each Receipt this Period  
250.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Danbury, Peter, , ,**

Mailing Address 3023 41st Ave S

City Minneapolis	State MN	Zip Code 55406-2230
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Self-Employed	Occupation (for Individual) Actor
--	--------------------------------------

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  
 02 / 19 / 2024

**Transaction ID : 22864480**

Amount of Each Receipt this Period  
500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<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:	PAGE 16 OF 72
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A. Dendler, Janice, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 140 Foxwell Bend Rd  
 City Glen Burnie State MD Zip Code 21061-6297  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 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  
 02 / 19 / 2024  
**Transaction ID : 22864479**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**B. Evans, Mitchell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 16745 Osborne St  
 City Northridge State CA Zip Code 91343-4013  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 12 / 2024  
**Transaction ID : 22814846**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. Evans, Mitchell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 16745 Osborne St  
 City Northridge State CA Zip Code 91343-4013  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 19 / 2024  
**Transaction ID : 22865198**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1300.00
<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:	PAGE 17 OF 72
(check only one)	
<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Evans, Mitchell, , ,**

Mailing Address 16745 Osborne St

City Northridge	State CA	Zip Code 91343-4013
--------------------	-------------	------------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
320.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	26	/	2024

**Transaction ID : 22928457**

Amount of Each Receipt this Period  
10.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Fabrikant, Stacey, , ,**

Mailing Address 40 W 24th St

City New York	State NY	Zip Code 10010-3215
------------------	-------------	------------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	26	/	2024

**Transaction ID : 22925943**

Amount of Each Receipt this Period  
250.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Fellers, Rita, , ,**

Mailing Address 201 NC 54  
Apt 101

City Carrboro	State NC	Zip Code 27510-1630
------------------	-------------	------------------------

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

Name of Employer (for Individual) Self-Employed	Occupation (for Individual) Home Health Aide
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	12	/	2024

**Transaction ID : 22814847**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	510.00
<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 18 OF 72
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A. Field, Alan, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27 Edward Dr

City Winchester	State MA	Zip Code 01890-3606
--------------------	-------------	------------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 19 / 2024

**Transaction ID : 22866701**

Amount of Each Receipt this Period  
300.00

Memo Item

**B. Fields, Thomas, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 69 Carol PI

City Wayne	State NJ	Zip Code 07470-2925
---------------	-------------	------------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 05 / 2024

**Transaction ID : 22785647**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. Fields, Thomas, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 69 Carol PI

City Wayne	State NJ	Zip Code 07470-2925
---------------	-------------	------------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 12 / 2024

**Transaction ID : 22814737**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	500.00
<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 19 OF 72		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A. Fischer, William, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 24 9th St NE  
 City Washington State DC Zip Code 20002-6012  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Port Side Strategies Occupation (for Individual) Government Relations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 19 / 2024  
**Transaction ID : 22864473**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Fleming, Ginny, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 530 Rayburn Ave  
 City Wake Forest State NC Zip Code 27587-2812  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 26 / 2024  
**Transaction ID : 22927221**  
 Amount of Each Receipt this Period  
 5.50  
 Memo Item

**C. Forbath, William, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3206 Greenlee Dr  
 City Austin State TX Zip Code 78703-1622  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) UT Austin Occupation (for Individual) Professor  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 12 / 2024  
**Transaction ID : 22814546**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	505.50
<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 20 OF 72
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A. Forcht, Lisa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 769 Montgomery St  
Apt 401

City Jersey City State NJ Zip Code 07306-4665

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

Name of Employer (for Individual) Hawkins Delafield & Wood LLP Occupation (for Individual) Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 05 / 2024

**Transaction ID : 22785300**

Amount of Each Receipt this Period  
 250.00

Memo Item

**B. Fox, Lynda, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19630 Juna Ln

City Saratoga State CA Zip Code 95070-6419

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

Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 19 / 2024

**Transaction ID : 22864972**

Amount of Each Receipt this Period  
 250.00

Memo Item

**C. Franzi, Cheryl, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5705 Moddison Ave

City Sacramento State CA Zip Code 95819-2521

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

Name of Employer (for Individual) N/A Occupation (for Individual) Retired

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 12 / 2024

**Transaction ID : 22814542**

Amount of Each Receipt this Period  
 250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	750.00
<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 21 OF 72
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A. Franzi, Cheryl, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5705 Moddison Ave  
 City Sacramento State CA Zip Code 95819-2521  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 26 / 2024  
**Transaction ID : 22926746**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Giguere, Patricia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 29654 Ontario Ct  
 City Englewood State FL Zip Code 34223-5215  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 05 / 2024  
**Transaction ID : 22785698**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Goodwin, Lawrence, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 525 E 86th St Apt 5H  
 City New York State NY Zip Code 10028-7513  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 26 / 2024  
**Transaction ID : 22925941**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	800.00
<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: PAGE 22 OF 72  
(check only one)

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

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)  
**Congressional Progressive Caucus PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Haering, James, , ,**

Mailing Address 5855 Cartago Dr

City Lansing	State MI	Zip Code 48911-6497
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Self-Employed	Occupation (for Individual) Physician
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
280.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	12	/	2024

**Transaction ID : 22813948**

Amount of Each Receipt this Period  
100.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Haering, James, , ,**

Mailing Address 5855 Cartago Dr

City Lansing	State MI	Zip Code 48911-6497
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Self-Employed	Occupation (for Individual) Physician
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
280.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	12	/	2024

**Transaction ID : 22815761**

Amount of Each Receipt this Period  
5.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Haering, James, , ,**

Mailing Address 5855 Cartago Dr

City Lansing	State MI	Zip Code 48911-6497
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Self-Employed	Occupation (for Individual) Physician
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
280.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	29	/	2024

**Transaction ID : 22928149**

Amount of Each Receipt this Period  
35.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	140.00
<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 23 OF 72
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A. Harper, Jewell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3727 Calumet Rd  
 City Decatur State GA Zip Code 30034-2131  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 12 / 2024  
**Transaction ID : 22815482**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**B. Harper, Jewell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3727 Calumet Rd  
 City Decatur State GA Zip Code 30034-2131  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 26 / 2024  
**Transaction ID : 22927959**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**C. Henry, Earl, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6880 52nd St N  
 City Pinellas Park State FL Zip Code 33781-5742  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Student  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 12 / 2024  
**Transaction ID : 22814545**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	400.00
<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 24 OF 72
	<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)  
**Congressional Progressive Caucus PAC**

**A. Hills, Jane, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 23 Greenwood Bay Dr  
 City Belvedere Tiburon State CA Zip Code 94920-2253  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 12 / 2024  
**Transaction ID : 22815480**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**B. Hills, Jane, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 23 Greenwood Bay Dr  
 City Belvedere Tiburon State CA Zip Code 94920-2253  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 19 / 2024  
**Transaction ID : 22866606**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. Holtzman, Neil, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2270 Eastridge Ave  
 City Menlo Park State CA Zip Code 94025-6713  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 26 / 2024  
**Transaction ID : 22926738**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	550.00
<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: PAGE 25 OF 72 (check only one)
<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A. Humphries, Emmanuel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7155 Mission Grove Pkwy  
 City Riverside State CA Zip Code 92506-6138  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DSHS Occupation (for Individual) Caregiver  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 231.44

Date of Receipt **02 / 12 / 2024**  
**Transaction ID : 22815479**  
 Amount of Each Receipt this Period 20.24  
 Memo Item

**B. Humphries, Emmanuel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7155 Mission Grove Pkwy  
 City Riverside State CA Zip Code 92506-6138  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DSHS Occupation (for Individual) Caregiver  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 231.44

Date of Receipt **02 / 12 / 2024**  
**Transaction ID : 22815481**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Humphries, Emmanuel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7155 Mission Grove Pkwy  
 City Riverside State CA Zip Code 92506-6138  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DSHS Occupation (for Individual) Caregiver  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 231.44

Date of Receipt **02 / 12 / 2024**  
**Transaction ID : 22815551**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	120.24
<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 26 OF 72  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Humphries, Emmanuel, , ,**

Mailing Address 7155 Mission Grove Pkwy

City Riverside State CA Zip Code 92506-6138

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 231.44

Date of Receipt  
MM / DD / YYYY  
02 / 12 / 2024

**Transaction ID : 22815947**

Amount of Each Receipt this Period  
5.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Humphries, Emmanuel, , ,**

Mailing Address 7155 Mission Grove Pkwy

City Riverside State CA Zip Code 92506-6138

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 231.44

Date of Receipt  
MM / DD / YYYY  
02 / 19 / 2024

**Transaction ID : 22866562**

Amount of Each Receipt this Period  
20.24

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Humphries, Emmanuel, , ,**

Mailing Address 7155 Mission Grove Pkwy

City Riverside State CA Zip Code 92506-6138

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼ 231.44

Date of Receipt  
MM / DD / YYYY  
02 / 29 / 2024

**Transaction ID : 22928012**

Amount of Each Receipt this Period  
20.24

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 45.48

**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 27 OF 72  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Karesse, Grenier, , ,**

Mailing Address 425 Riverside Dr

City New York State NY Zip Code 10025-7775

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

Name of Employer (for Individual) Self-Employed Occupation (for Individual) Real Estate

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt **02 / 05 / 2024**

**Transaction ID : 22785302**

Amount of Each Receipt this Period 250.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Katzin, Donna, , ,**

Mailing Address 160 Riverside Dr

City New York State NY Zip Code 10024-2106

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

Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt **02 / 19 / 2024**

**Transaction ID : 22865509**

Amount of Each Receipt this Period 250.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Kawaf, Tareef, , ,**

Mailing Address 2 Oak Meadow Rd

City Lincoln State MA Zip Code 01773-2214

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

Name of Employer (for Individual) RStudio PBC Occupation (for Individual) President

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date ▼ 250.00

Date of Receipt **02 / 19 / 2024**

**Transaction ID : 22865507**

Amount of Each Receipt this Period 250.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 750.00

**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 28 OF 72
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A. Kreiter, Cheryl, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1615 N Wolcott Ave  
 City Chicago State IL Zip Code 60622-1338  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 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  
 02 / 19 / 2024  
**Transaction ID : 22865502**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**B. Lake, Celinda, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 126 F St SE  
 City Washington State DC Zip Code 20003-2603  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lake Research Partners Occupation (for Individual) Pollster  
 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  
 02 / 26 / 2024  
**Transaction ID : 22925927**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C. Lehde, Anika, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1612 S Hinds St  
 City Seattle State WA Zip Code 98144-6624  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 19 / 2024  
**Transaction ID : 22865505**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1750.00
<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:	PAGE 29 OF 72
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A. Lorenz, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2517 Arthurs Court Ln  
 City Tallahassee State FL Zip Code 32301-3324  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.24

Date of Receipt **02 / 05 / 2024**  
**Transaction ID : 22785975**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. Lorenz, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2517 Arthurs Court Ln  
 City Tallahassee State FL Zip Code 32301-3324  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.24

Date of Receipt **02 / 26 / 2024**  
**Transaction ID : 22926807**  
 Amount of Each Receipt this Period 20.24  
 Memo Item

**C. Martin, Phyllis, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4411 E Bridgestone Dr  
 City Bloomington State IN Zip Code 47401-8889  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **02 / 12 / 2024**  
**Transaction ID : 22814543**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	370.24
<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 30 OF 72
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)  
**Congressional Progressive Caucus PAC**

**A. McDougle, Mark, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 390 Riverside Dr  
 Apt 6F  
 City New York State NY Zip Code 10025-1897  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 26 / 2024  
**Transaction ID : 22927610**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Mckenna, Regis, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1409 Galloway Ct  
 City Sunnyvale State CA Zip Code 94087-4067  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 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  
 02 / 12 / 2024  
**Transaction ID : 22814731**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C. Mowll, Kenneth, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 361 E Sheridan St  
 Apt 309  
 City Dania Beach State FL Zip Code 33004-5550  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 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  
 02 / 19 / 2024  
**Transaction ID : 22865504**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1250.00
<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:	PAGE 31 OF 72
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A. Neralla, Ven, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2100 11th St NW  
 Apt 207  
 City Washington State DC Zip Code 20001-8027  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Federal Street Strategies Occupation (for Individual) Government Relations Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **03 / 17 / 2024**  
**Transaction ID : 22894738**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 \* Earmarked Contribution: See Below

**B. NATIONAL ASSOCIATION OF BROADCASTERS POLITICAL ACTION COMMITTEE (NABPAC)**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1 M St SE  
 City Washington State DC Zip Code 20003-3512  
 FEC ID number of contributing federal political committee. **C** C00009985  
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **02 / 23 / 2024**  
**Transaction ID : 22894738E**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 Note: Above Contribution earmarked through this organization.

**C. Ostaszewski, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10336 E Talameer Ave  
 City Mesa State AZ Zip Code 85212-8142  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Nationwide Insurance Occupation (for Individual) Software Engineer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **02 / 12 / 2024**  
**Transaction ID : 22814541**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1500.00
<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 32 OF 72
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Press, Nancy, , ,</b>		Date of Receipt MM / DD / YYYY 02 / 19 / 2024 <b>Transaction ID : 22864971</b>
Mailing Address 11018 Exeter Ave NE		Amount of Each Receipt this Period 250.00
City Seattle	State WA	Zip Code 98125-5929
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) University of Washington	Occupation (for Individual) Technical Writer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Raghavan, Shuba, , ,</b>		Date of Receipt MM / DD / YYYY 02 / 19 / 2024 <b>Transaction ID : 22864459</b>
Mailing Address 5804 Ocean View Dr		Amount of Each Receipt this Period 1500.00
City Oakland	State CA	Zip Code 94618-1535
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Self-Employed	Occupation (for Individual) Energy Policy Analyst	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Rauch, Angela, , ,</b>		Date of Receipt MM / DD / YYYY 02 / 05 / 2024 <b>Transaction ID : 22785653</b>
Mailing Address 115 4th Ave Apt 4F		Amount of Each Receipt this Period 50.00
City New York	State NY	Zip Code 10003-4908
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1800.00
<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:	PAGE 33 OF 72
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Rauch, Angela, , ,**

Mailing Address 115 4th Ave  
Apt 4F

City New York State NY Zip Code 10003-4908

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

Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
02 / 12 / 2024  
**Transaction ID : 22814566**

Amount of Each Receipt this Period  
50.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Richerson, Peter, J, ,**

Mailing Address 210 Full Cir

City Davis State CA Zip Code 95618-5408

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

Name of Employer (for Individual) N/A Occupation (for Individual) Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
02 / 12 / 2024  
**Transaction ID : 22814540**

Amount of Each Receipt this Period  
500.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Rivest, Ronald, , ,**

Mailing Address 41 Academy St

City Arlington State MA Zip Code 02476-6433

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
02 / 05 / 2024  
**Transaction ID : 22786059**

Amount of Each Receipt this Period  
500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1050.00
<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 34 OF 72
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. saless, fatieh, , ,</b>		Date of Receipt MM / DD / YYYY 02 / 12 / 2024 <b>Transaction ID : 22814864</b>
Mailing Address PO Box 3235		Amount of Each Receipt this Period 50.00
City Danville	State CA	Zip Code 94526-9435
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. saless, fatieh, , ,</b>		Date of Receipt MM / DD / YYYY 02 / 19 / 2024 <b>Transaction ID : 22864991</b>
Mailing Address PO Box 3235		Amount of Each Receipt this Period 50.00
City Danville	State CA	Zip Code 94526-9435
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. saless, fatieh, , ,</b>		Date of Receipt MM / DD / YYYY 02 / 26 / 2024 <b>Transaction ID : 22926511</b>
Mailing Address PO Box 3235		Amount of Each Receipt this Period 75.00
City Danville	State CA	Zip Code 94526-9435
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 325.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	175.00
<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:	PAGE 35 OF 72
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. saless, fatieh, , ,**

Mailing Address **PO Box 3235**

City Danville	State CA	Zip Code 94526-9435
------------------	-------------	------------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed
--	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**325.00**

Date of Receipt  
**02 / 29 / 2024**

**Transaction ID : 22927468**

Amount of Each Receipt this Period  
**50.00**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Smith, Moon, , ,**

Mailing Address **512 W Allens Ln**

City Philadelphia	State PA	Zip Code 19119-2806
----------------------	-------------	------------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed
--	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**260.00**

Date of Receipt  
**02 / 19 / 2024**

**Transaction ID : 22866539**

Amount of Each Receipt this Period  
**5.00**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Smith, Moon, , ,**

Mailing Address **512 W Allens Ln**

City Philadelphia	State PA	Zip Code 19119-2806
----------------------	-------------	------------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed
--	---

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
**260.00**

Date of Receipt  
**02 / 26 / 2024**

**Transaction ID : 22927608**

Amount of Each Receipt this Period  
**250.00**

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>305.00</b>
<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 36 OF 72
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A. Spurr, Charles, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 139 Broadway St  
 City Wakefield State MA Zip Code 01880-3105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 05 / 2024  
**Transaction ID : 22785701**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**B. Spurr, Charles, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 139 Broadway St  
 City Wakefield State MA Zip Code 01880-3105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 12 / 2024  
**Transaction ID : 22814552**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**C. Spurr, Charles, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 139 Broadway St  
 City Wakefield State MA Zip Code 01880-3105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 26 / 2024  
**Transaction ID : 22926509**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<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 37 OF 72
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A. Spurr, Charles, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 139 Broadway St  
 City Wakefield State MA Zip Code 01880-3105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 26 / 2024  
**Transaction ID : 22926510**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**B. Tai, Andrew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 655 Plantation St Unit 20B  
 City Worcester State MA Zip Code 01605-2092  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Webster Public Library Occupation (for Individual) Youth Services Librarian  
 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  
 02 / 19 / 2024  
**Transaction ID : 22865508**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. Tai, Andrew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 655 Plantation St Unit 20B  
 City Worcester State MA Zip Code 01605-2092  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Webster Public Library Occupation (for Individual) Youth Services Librarian  
 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  
 02 / 19 / 2024  
**Transaction ID : 22866568**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	600.00
<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 38 OF 72
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Turcotte, Norman, , ,</b>		Date of Receipt MM / DD / YYYY 02 / 12 / 2024 <b>Transaction ID : 22813955</b>
Mailing Address 25 Shaw Dr		Amount of Each Receipt this Period 1000.00
City Bedford	State NH	Zip Code 03110-6050
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Turcotte, Norman, , ,</b>		Date of Receipt MM / DD / YYYY 02 / 19 / 2024 <b>Transaction ID : 22864478</b>
Mailing Address 25 Shaw Dr		Amount of Each Receipt this Period 1000.00
City Bedford	State NH	Zip Code 03110-6050
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Waineo, Marcus, , ,</b>		Date of Receipt MM / DD / YYYY 02 / 26 / 2024 <b>Transaction ID : 22927958</b>
Mailing Address 20921 Rubles Mill Ct		Amount of Each Receipt this Period 250.00
City Ashburn	State VA	Zip Code 20147-4879
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) NVIDIA Corporation	Occupation (for Individual) Software Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 750.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2250.00
<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 39 OF 72
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A. Walker, Leslie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 201 Island View Rd # 1292  
 City Eastsound State WA Zip Code 98245-5574  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 02 / 12 / 2024  
**Transaction ID : 22813954**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. Walker, Leslie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 201 Island View Rd # 1292  
 City Eastsound State WA Zip Code 98245-5574  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 02 / 19 / 2024  
**Transaction ID : 22864488**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. Wallace, Jeff, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 129 W Long Pond Rd  
 City Plymouth State MA Zip Code 02360-3257  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 29 / 2024  
**Transaction ID : 22926494**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1350.00
<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 40 OF 72
	<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)  
**Congressional Progressive Caucus PAC**

**A. Walton, Gerald, S, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3150 Tanner Park Dr  
 City Eugene State OR Zip Code 97405-6252  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 19 / 2024  
**Transaction ID : 22866702**  
 Amount of Each Receipt this Period 300.00  
 Memo Item

**B. Weygand, Patrick, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8527 Pickford St  
 City Los Angeles State CA Zip Code 90035-3616  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Motional Occupation (for Individual) Software Engineer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 26 / 2024  
**Transaction ID : 22927609**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Wilson, Corinne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5012 Abuela Dr  
 City San Diego State CA Zip Code 92124-2019  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) San Diego Municipal Employees Assoc Occupation (for Individual) Strategic Campaigns Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 19 / 2024  
**Transaction ID : 22865511**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	800.00
<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:	PAGE 41 OF 72
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Wood, Andrea, , ,

Mailing Address 6701 Pinehaven Rd

City Oakland	State CA	Zip Code 94611-1013
-----------------	-------------	------------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
270.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	05	/	2024

**Transaction ID : 22786054**

Amount of Each Receipt this Period  
35.00

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Wood, Andrea, , ,

Mailing Address 6701 Pinehaven Rd

City Oakland	State CA	Zip Code 94611-1013
-----------------	-------------	------------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
270.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	26	/	2024

**Transaction ID : 22928058**

Amount of Each Receipt this Period  
100.00

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Younies, Ahmed, , ,

Mailing Address 1520 Brookhollow Dr  
Ste 41

City Santa Ana	State CA	Zip Code 92705-5422
-------------------	-------------	------------------------

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

Name of Employer (for Individual) HRU	Occupation (for Individual) CEO/President
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	26	/	2024

**Transaction ID : 22926493**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	385.00
<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 42 OF 72		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A. Zazzera, Theresa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 19 44th St  
 City Fell Township State PA Zip Code 18407-1005  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 26 / 2024  
**Transaction ID : 22925942**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Zazzera, Theresa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 19 44th St  
 City Fell Township State PA Zip Code 18407-1005  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 26 / 2024  
**Transaction ID : 22926352**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**C. Zuch, Graham, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 421 Summit Ave E Apt 106  
 City Seattle State WA Zip Code 98102-4855  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DSHS WA State Occupation (for Individual) Ltc Aces Program Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 19 / 2024  
**Transaction ID : 22865506**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	505.00
<b>TOTAL</b> This Period (last page this line number only).....▶	27632.46

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

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

FOR LINE NUMBER: PAGE 43 OF 72  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A. COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 501 3rd St NW  
 City Washington State DC Zip Code 20001-2760  
 FEC ID number of contributing federal political committee. **C** C00002089  
 Name of Employer (for Individual) Occupation (for Individual)  
 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  
 02 / 16 / 2024  
**Transaction ID : 22867881**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

**B. CULAC THE PAC OF CREDIT UNION NATIONAL ASSOCIATION**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 99 M St SE Ste 300  
 City Washington State DC Zip Code 20003-3957  
 FEC ID number of contributing federal political committee. **C** C00007880  
 Name of Employer (for Individual) Occupation (for Individual)  
 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  
 02 / 12 / 2024  
**Transaction ID : 22867879**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

**C. DEMAND JUSTICE PAC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 611 Pennsylvania Ave SE # 192  
 City Washington State DC Zip Code 20003-4303  
 FEC ID number of contributing federal political committee. **C** C00760827  
 Name of Employer (for Individual) Occupation (for Individual)  
 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  
 02 / 16 / 2024  
**Transaction ID : 22831624**  
 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 44 OF 72
<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)  
**Congressional Progressive Caucus PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. INDIVIDUALS DEDICATED TO ETHICS AND SCIENCE PAC</b>		Date of Receipt
Mailing Address PO Box 40725		<input type="text" value="02"/> / <input type="text" value="02"/> / <input type="text" value="2024"/>
City Denver	State CO	Zip Code 80204-0725
FEC ID number of contributing federal political committee. <b>C</b> C00380675		<b>Transaction ID : 22787575</b>
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION PAC (NARFE-PAC)</b>		Date of Receipt
Mailing Address 606 N Washington St		<input type="text" value="02"/> / <input type="text" value="16"/> / <input type="text" value="2024"/>
City Alexandria	State VA	Zip Code 22314-1914
FEC ID number of contributing federal political committee. <b>C</b> C00091561		<b>Transaction ID : 22867880</b>
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. NATIONAL UNION OF HEALTHCARE WORKERS FEDERAL COMMITTEE ON POLITICAL EDUCATION</b>		Date of Receipt
Mailing Address 1787 Tribute Rd Ste K		<input type="text" value="02"/> / <input type="text" value="23"/> / <input type="text" value="2024"/>
City Sacramento	State CA	Zip Code 95815-4404
FEC ID number of contributing federal political committee. <b>C</b> C00461418		<b>Transaction ID : 22894737</b>
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="15000.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 45 OF 72  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 POLITICAL ACTION COMMITTEE OF THE INTERNATIONAL ALLIANCE OF THEATRICAL STAGE EMPLOYEES

Mailing Address 207 W 25th St  
 Fl 4

City New York State NY Zip Code 10001-7141

FEC ID number of contributing federal political committee. **C** C00344325

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

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  
 02 / 26 / 2024

**Transaction ID : 22985341**

Amount of Each Receipt this Period  
 5000.00

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 RASHIDA TLAIB FOR CONGRESS

Mailing Address PO Box 32777

City Detroit State MI Zip Code 48232-0777

FEC ID number of contributing federal political committee. **C** C00668608

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

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  
 02 / 12 / 2024

**Transaction ID : 22985355**

Amount of Each Receipt this Period  
 5000.00

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 SIERRA CLUB POLITICAL COMMITTEE

Mailing Address 2101 Webster St  
 Ste 1300

City Oakland State CA Zip Code 94612-3546

FEC ID number of contributing federal political committee. **C** C00135368

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

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  
 02 / 26 / 2024

**Transaction ID : 22894736**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 11000.00

**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 46 OF 72
<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)  
**Congressional Progressive Caucus PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. TRANSPORT WORKERS UNION POLITICAL CONTRIBUTIONS COMMITTEE</b>		Date of Receipt MM / DD / YYYY 02 / 12 / 2024 <b>Transaction ID : 22867878</b>
Mailing Address 501 3rd St NW FI 9		Amount of Each Receipt this Period 5000.00
City Washington	State DC	Zip Code 20001-2790
FEC ID number of contributing federal political committee. C C00008268		<input type="checkbox"/> Memo Item
Name of Employer (for Individual)	Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. UNITED FOOD &amp; COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB</b>		Date of Receipt MM / DD / YYYY 02 / 16 / 2024 <b>Transaction ID : 22867882</b>
Mailing Address 1775 K St NW Bsmt		Amount of Each Receipt this Period 5000.00
City Washington	State DC	Zip Code 20006-1521
FEC ID number of contributing federal political committee. C C00002766		<input type="checkbox"/> Memo Item
Name of Employer (for Individual)	Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C.</b>		Date of Receipt MM / DD / YYYY
Mailing Address		Amount of Each Receipt this Period
City	State	Zip Code
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual)	Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	51000.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Congressional Progressive Caucus PAC**

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address 366 Summer St

City  
Somerville

State  
MA

Zip Code  
02144-3132

Purpose of Disbursement

Credit Card Processing Fees

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:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

**Transaction ID : 500431707**

Amount of Each Disbursement this Period

[REDACTED] 690.76

Memo Item

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services**

Mailing Address 366 Summer St

City  
Somerville

State  
MA

Zip Code  
02144-3132

Purpose of Disbursement

Credit Card Processing Fees

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:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

**Transaction ID : 500432023**

Amount of Each Disbursement this Period

[REDACTED] 1347.42

Memo Item

Full Name (Last, First, Middle Initial)

**C. ActBlue Technical Services**

Mailing Address 366 Summer St

City  
Somerville

State  
MA

Zip Code  
02144-3132

Purpose of Disbursement

Credit Card Processing Fees

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	9		2	0	2	4

FEC Identification Number

C [REDACTED]

**Transaction ID : 500432864**

Amount of Each Disbursement this Period

[REDACTED] 2380.90

Memo Item

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

[REDACTED] 4419.08

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

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Congressional Progressive Caucus PAC**

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address 366 Summer St

City  
Somerville

State  
MA

Zip Code  
02144-3132

Purpose of Disbursement

Credit Card Processing Fees

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	2			2	6			2	0	2	4		

FEC Identification Number

C [REDACTED]

**Transaction ID : 500433662**

Amount of Each Disbursement this Period

[REDACTED] 1303.32

Memo Item

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services**

Mailing Address 366 Summer St

City  
Somerville

State  
MA

Zip Code  
02144-3132

Purpose of Disbursement

Credit Card Processing Fees

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	2			2	9			2	0	2	4		

FEC Identification Number

C [REDACTED]

**Transaction ID : 500433654**

Amount of Each Disbursement this Period

[REDACTED] 482.86

Memo Item

Full Name (Last, First, Middle Initial)

**C. Aisle 518**

Mailing Address 2045 W Grand Ave  
Ste B

City  
Chicago

State  
IL

Zip Code  
60612-1577

Purpose of Disbursement

Fundraising Consulting and Texting Services

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	2			0	6			2	0	2	4		

FEC Identification Number

C [REDACTED]

**Transaction ID : 500431818**

Amount of Each Disbursement this Period

[REDACTED] 18397.90

Memo Item

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

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

[REDACTED] 20184.08

[REDACTED]



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Congressional Progressive Caucus PAC**

Full Name (Last, First, Middle Initial)

**A. Aisle 518**

Mailing Address 2045 W Grand Ave  
Ste B

City Chicago State IL Zip Code 60612-1577

Purpose of Disbursement

Outreach Services

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	2		0	7		2	0	2	4

FEC Identification Number

**C**

**Transaction ID : 500431817**

Amount of Each Disbursement this Period

1047.61

Memo Item

Full Name (Last, First, Middle Initial)

**B. Aisle 518**

Mailing Address 2045 W Grand Ave  
Ste B

City Chicago State IL Zip Code 60612-1577

Purpose of Disbursement

Digital Ad Buy

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	2		1	3		2	0	2	4

FEC Identification Number

**C**

**Transaction ID : 500433053**

Amount of Each Disbursement this Period

2778.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Aisle 518**

Mailing Address 2045 W Grand Ave  
Ste B

City Chicago State IL Zip Code 60612-1577

Purpose of Disbursement

Digital Ad Buy

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	2		1	3		2	0	2	4

FEC Identification Number

**C**

**Transaction ID : 500433054**

Amount of Each Disbursement this Period

17222.23

Memo Item

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

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

21047.84

# 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"/> 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)

## Congressional Progressive Caucus PAC

Full Name (Last, First, Middle Initial)

**A. Aisle 518**

Mailing Address 2045 W Grand Ave  
Ste B

City Chicago State IL Zip Code 60612-1577

Purpose of Disbursement

Digital Ad Buy

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
02	/	26	/	2024

FEC Identification Number

C [ ]

**Transaction ID : 500433528**

Amount of Each Disbursement this Period

[ ] 15000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Amalgamated Bank**

Mailing Address 275 7th Ave

City New York State NY Zip Code 10001-6708

Purpose of Disbursement

Bank Fees

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
02	/	27	/	2024

FEC Identification Number

C [ ]

**Transaction ID : 500433523**

Amount of Each Disbursement this Period

[ ] 12.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Amalgamated Bank**

Mailing Address 275 7th Ave

City New York State NY Zip Code 10001-6708

Purpose of Disbursement

Bank Fees

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
02	/	27	/	2024

FEC Identification Number

C [ ]

**Transaction ID : 500433524**

Amount of Each Disbursement this Period

[ ] 12.00

Memo Item

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

[ ] 15024.00

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

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)

**Congressional Progressive Caucus PAC**

Full Name (Last, First, Middle Initial)

### A. Amalgamated Bank

Mailing Address 275 7th Ave

City  
New York

State  
NY

Zip Code  
10001-6708

Purpose of Disbursement

Bank Fees

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	7		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : 500433525

Amount of Each Disbursement this Period

[REDACTED] 95.25

Memo Item

Full Name (Last, First, Middle Initial)

### B. American Express Company

Mailing Address 3 WORLD FINANCIAL CTR 200 VESEY St

City  
New York

State  
NY

Zip Code  
10285-0001

Purpose of Disbursement

Credit Card Payment, See Memos Below if Itemized

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:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : 500432727

Amount of Each Disbursement this Period

[REDACTED] 6319.57

Memo Item

Full Name (Last, First, Middle Initial)

### C. Amazon

Mailing Address 10 TERRY Ave N

City  
Seattle

State  
WA

Zip Code  
98109

Purpose of Disbursement

Software Services

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:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : 500432724

Amount of Each Disbursement this Period

[REDACTED] 76.56

Memo Item

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

[REDACTED] 6414.82

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

[REDACTED]

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

Form for line numbers 21b-30b with checkboxes. 21b is checked.

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

Form A: Amazon. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Office Supplies), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (02/14/2024), FEC Identification Number, Transaction ID (500432743), Amount (258.35), and Memo Item checked.

Form B: Amazon. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Office Supplies), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (02/14/2024), FEC Identification Number, Transaction ID (500432745), Amount (29.67), and Memo Item checked.

Form C: Amazon. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Office Supplies), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (02/14/2024), FEC Identification Number, Transaction ID (500432748), Amount (124.23), and Memo Item checked.

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

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NAME OF COMMITTEE (In Full)

**Congressional Progressive Caucus PAC**

Full Name (Last, First, Middle Initial)

**A. Lowes**

Mailing Address 1000 Lowes Blvd

City  
Mooreville

State  
NC

Zip Code  
28117-8520

Purpose of Disbursement

Office Supplies

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:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

**Transaction ID : 500432750**

Amount of Each Disbursement this Period

[REDACTED] 613.74

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Mailchimp**

Mailing Address 675 Ponce De Leon Ave NE  
# E178

City  
Atlanta

State  
GA

Zip Code  
30308-1884

Purpose of Disbursement

Email Services

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:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

**Transaction ID : 500432746**

Amount of Each Disbursement this Period

[REDACTED] 106.00

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Tatango**

Mailing Address 2211 Elliott Ave  
Ste 200

City  
Seattle

State  
WA

Zip Code  
98121-3622

Purpose of Disbursement

Texting Services

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:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

**Transaction ID : 500432719**

Amount of Each Disbursement this Period

[REDACTED] 727.16

Memo Item \*

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

[REDACTED] 0.00

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

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Congressional Progressive Caucus PAC**

Full Name (Last, First, Middle Initial)

**A. Tatango**

Mailing Address 2211 Elliott Ave  
Ste 200

City  
Seattle

State  
WA

Zip Code  
98121-3622

Purpose of Disbursement

Texting Services

Candidate Name

Category/  
Type

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	2		1	4		2	0	2	4

FEC Identification Number

C

**Transaction ID : 500432720**

Amount of Each Disbursement this Period

562.86

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Tatango**

Mailing Address 2211 Elliott Ave  
Ste 200

City  
Seattle

State  
WA

Zip Code  
98121-3622

Purpose of Disbursement

Texting Services

Candidate Name

Category/  
Type

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	2		1	4		2	0	2	4

FEC Identification Number

C

**Transaction ID : 500432721**

Amount of Each Disbursement this Period

530.00

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Tatango**

Mailing Address 2211 Elliott Ave  
Ste 200

City  
Seattle

State  
WA

Zip Code  
98121-3622

Purpose of Disbursement

Texting Services

Candidate Name

Category/  
Type

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	2		1	4		2	0	2	4

FEC Identification Number

C

**Transaction ID : 500432722**

Amount of Each Disbursement this Period

630.70

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

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NAME OF COMMITTEE (In Full)

**Congressional Progressive Caucus PAC**

Full Name (Last, First, Middle Initial)

**A. The Congress Plaza Hotel & Convention Center**

Mailing Address 520 S Michigan Ave

City  
Chicago

State  
IL

Zip Code  
60605-1602

Purpose of Disbursement

Lodging

Candidate Name

Category/  
Type

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	2		1	4		2	0	2	4

FEC Identification Number

C

**Transaction ID : 500432729**

Amount of Each Disbursement this Period

3	2	7	5	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

Transportation

Candidate Name

Category/  
Type

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	2		1	4		2	0	2	4

FEC Identification Number

C

**Transaction ID : 500432731**

Amount of Each Disbursement this Period

3	0	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

Transportation

Candidate Name

Category/  
Type

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	2		1	4		2	0	2	4

FEC Identification Number

C

**Transaction ID : 500432732**

Amount of Each Disbursement this Period

1	2	8	6
---	---	---	---

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)

Form for line numbers: 21b, 28a, 22, 28b, 23, 28c, 26, 29, 27, 30b

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

Form A: Uber Technologies. Includes fields for Full Name, Mailing Address (1455 Market St, FI 4), City (San Francisco), State (CA), Zip Code (94103-1355), Purpose of Disbursement (Transportation), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (02/14/2024), FEC Identification Number, Transaction ID (500432733), Amount of Each Disbursement (12.97), and Memo Item checked.

Form B: Uber Technologies. Includes fields for Full Name, Mailing Address (1455 Market St, FI 4), City (San Francisco), State (CA), Zip Code (94103-1355), Purpose of Disbursement (Transportation), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (02/14/2024), FEC Identification Number, Transaction ID (500432734), Amount of Each Disbursement (12.96), and Memo Item checked.

Form C: Uber Technologies. Includes fields for Full Name, Mailing Address (1455 Market St, FI 4), City (San Francisco), State (CA), Zip Code (94103-1355), Purpose of Disbursement (Transportation), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (02/14/2024), FEC Identification Number, Transaction ID (500432735), Amount of Each Disbursement (26.99), and Memo Item checked.

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)

Form for line numbers 21b-30b with checkboxes. 21b is checked.

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

Form A: Uber Technologies. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, Amount of Each Disbursement, and Memo Item checkbox.

Form B: Uber Technologies. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, Amount of Each Disbursement, and Memo Item checkbox.

Form C: Uber Technologies. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, Amount of Each Disbursement, and Memo Item checkbox.

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)

Form for line numbers 21b-30b with checkboxes. 21b is checked.

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

Form A: Uber Technologies. Includes fields for Full Name, Mailing Address (1455 Market St, FI 4), City (San Francisco), State (CA), Zip Code (94103-1355), Purpose of Disbursement (Transportation), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (02/14/2024), FEC Identification Number (C), Transaction ID (500432739), Amount of Each Disbursement (3.00), and Memo Item checked.

Form B: Uber Technologies. Includes fields for Full Name, Mailing Address (1455 Market St, FI 4), City (San Francisco), State (CA), Zip Code (94103-1355), Purpose of Disbursement (Transportation), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (02/14/2024), FEC Identification Number (C), Transaction ID (500432740), Amount of Each Disbursement (11.00), and Memo Item checked.

Form C: Wayfair. Includes fields for Full Name, Mailing Address (4 Copley Pl, FI 7), City (Boston), State (MA), Zip Code (02116-6504), Purpose of Disbursement (Office Supplies), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (02/14/2024), FEC Identification Number (C), Transaction ID (500432749), Amount of Each Disbursement (1722.66), and Memo Item checked.

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

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NAME OF COMMITTEE (In Full)

**Congressional Progressive Caucus PAC**

Full Name (Last, First, Middle Initial)

### A. DC Health Link

Mailing Address 645 H St NE

City  
Washington

State  
DC

Zip Code  
20002-4347

Purpose of Disbursement

Health Insurance

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:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

**Transaction ID : 500431257**

Amount of Each Disbursement this Period

[REDACTED] 1854.39

Memo Item

Full Name (Last, First, Middle Initial)

### B. Fidelity Investments Institutional Operations Company

Mailing Address PO Box 770002

City  
Cincinnati

State  
OH

Zip Code  
45277-1102

Purpose of Disbursement

Employee Retirement Plan

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	9		2	0	2	4

FEC Identification Number

C [REDACTED]

**Transaction ID : 500431820**

Amount of Each Disbursement this Period

[REDACTED] 1008.66

Memo Item

Full Name (Last, First, Middle Initial)

### C. Fidelity Investments Institutional Operations Company

Mailing Address PO Box 770002

City  
Cincinnati

State  
OH

Zip Code  
45277-1102

Purpose of Disbursement

Employee Retirement Plan

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:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

**Transaction ID : 500433527**

Amount of Each Disbursement this Period

[REDACTED] 1008.66

Memo Item

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

[REDACTED] 3871.71

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

[REDACTED]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Congressional Progressive Caucus PAC**

Full Name (Last, First, Middle Initial)

### A. Grassroots Analytics

Mailing Address 700 K St NW  
Ste 300

City  
Washington

State  
DC

Zip Code  
20001-5692

Purpose of Disbursement

Texting Services

Candidate Name

Category/  
Type

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	2		1	5		2	0	2	4

FEC Identification Number

C [REDACTED]

**Transaction ID : 500432165**

Amount of Each Disbursement this Period

[REDACTED] 2500.00

Memo Item

Full Name (Last, First, Middle Initial)

### B. Grassroots Analytics

Mailing Address 700 K St NW  
Ste 300

City  
Washington

State  
DC

Zip Code  
20001-5692

Purpose of Disbursement

Texting Services

Candidate Name

Category/  
Type

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	2		1	5		2	0	2	4

FEC Identification Number

C [REDACTED]

**Transaction ID : 500432166**

Amount of Each Disbursement this Period

[REDACTED] 6318.04

Memo Item

Full Name (Last, First, Middle Initial)

### C. Grassroots Analytics

Mailing Address 700 K St NW  
Ste 300

City  
Washington

State  
DC

Zip Code  
20001-5692

Purpose of Disbursement

Texting Services

Candidate Name

Category/  
Type

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	2		2	0		2	0	2	4

FEC Identification Number

C [REDACTED]

**Transaction ID : 500433055**

Amount of Each Disbursement this Period

[REDACTED] 13700.00

Memo Item

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

[REDACTED] 22518.04

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

[REDACTED]

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

Form for line numbers 21b-30b with checkboxes. 21b is checked.

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)

Congressional Progressive Caucus PAC

Full Name (Last, First, Middle Initial)

A. Grassroots Analytics

Mailing Address 700 K St NW Ste 300

City Washington State DC Zip Code 20001-5692

Purpose of Disbursement

Texting Services

Candidate Name

Office Sought: House, Senate, President

Disbursement For: Primary, General, Other (specify)

State: District:

Date of Disbursement

Date of Disbursement: 02 / 20 / 2024

FEC Identification Number

FEC ID: C

Transaction ID : 500433056

Amount of Each Disbursement this Period

Amount: 2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Gusto

Mailing Address 525 20th St

City San Francisco State CA Zip Code 94107-4345

Purpose of Disbursement

Payroll Services

Candidate Name

Office Sought: House, Senate, President

Disbursement For: Primary, General, Other (specify)

State: District:

Date of Disbursement

Date of Disbursement: 02 / 05 / 2024

FEC Identification Number

FEC ID: C

Transaction ID : 500431813

Amount of Each Disbursement this Period

Amount: 131.65

Memo Item

Full Name (Last, First, Middle Initial)

C. Gusto

Mailing Address 525 20th St

City San Francisco State CA Zip Code 94107-4345

Purpose of Disbursement

Payroll Taxes

Candidate Name

Office Sought: House, Senate, President

Disbursement For: Primary, General, Other (specify)

State: District:

Date of Disbursement

Date of Disbursement: 02 / 08 / 2024

FEC Identification Number

FEC ID: C

Transaction ID : 500431814

Amount of Each Disbursement this Period

Amount: 4446.87

Memo Item

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

SUBTOTAL: 7078.52

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

TOTAL: 7078.52

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

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NAME OF COMMITTEE (In Full)

**Congressional Progressive Caucus PAC**

Full Name (Last, First, Middle Initial)

**A. Gusto**

Mailing Address 525 20th St

City  
San Francisco

State  
CA

Zip Code  
94107-4345

Purpose of Disbursement

Reimbursement

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	8		2	0	2	4

FEC Identification Number

C [REDACTED]

**Transaction ID : 500433060**

Amount of Each Disbursement this Period

[REDACTED] 36.15

Memo Item

Full Name (Last, First, Middle Initial)

**B. Brown, Evan, , ,**

Mailing Address 965 Florida Ave NW  
Apt 728

City  
Washington

State  
DC

Zip Code  
20001-5587

Purpose of Disbursement

Cell Phone Reimbursement

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	8		2	0	2	4

FEC Identification Number

C [REDACTED]

**Transaction ID : 500433059**

Amount of Each Disbursement this Period

[REDACTED] 36.15

Memo Item

Full Name (Last, First, Middle Initial)

**C. Gusto**

Mailing Address 525 20th St

City  
San Francisco

State  
CA

Zip Code  
94107-4345

Purpose of Disbursement

Payroll Salary

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	8		2	0	2	4

FEC Identification Number

C [REDACTED]

**Transaction ID : 500433067**

Amount of Each Disbursement this Period

[REDACTED] 8411.45

Memo Item

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

[REDACTED] 8447.60

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

[REDACTED]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Congressional Progressive Caucus PAC**

Full Name (Last, First, Middle Initial)

**A. Bailey, Ernest, , ,**

Mailing Address 1827 Kilbourne PI NW

City  
Washington

State  
DC

Zip Code  
20010-2622

Purpose of Disbursement

Salary

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:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		08		2024

FEC Identification Number

C [REDACTED]

**Transaction ID : 500433063**

Amount of Each Disbursement this Period

[REDACTED] 2248.39

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Brown, Evan, , ,**

Mailing Address 965 Florida Ave NW  
Apt 728

City  
Washington

State  
DC

Zip Code  
20001-5587

Purpose of Disbursement

Salary

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:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		08		2024

FEC Identification Number

C [REDACTED]

**Transaction ID : 500433064**

Amount of Each Disbursement this Period

[REDACTED] 3440.16

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Darner, Michael, , ,**

Mailing Address 1303 John St

City  
Baltimore

State  
MD

Zip Code  
21217-4116

Purpose of Disbursement

Salary

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:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		08		2024

FEC Identification Number

C [REDACTED]

**Transaction ID : 500433065**

Amount of Each Disbursement this Period

[REDACTED] 787.34

Memo Item \*

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

[REDACTED] 0.00

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

[REDACTED]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

## Congressional Progressive Caucus PAC

Full Name (Last, First, Middle Initial)

**A. Hines, Gillian, , ,**

Mailing Address 2778 N Milwaukee Ave  
Apt 217

City Chicago State IL Zip Code 60647-1323

Purpose of Disbursement

Salary

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	2		0	8		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : 500433066

Amount of Each Disbursement this Period

[REDACTED] 1935.56

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Gusto**

Mailing Address 525 20th St

City San Francisco State CA Zip Code 94107-4345

Purpose of Disbursement

Payroll Taxes

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	2		2	2		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : 500433058

Amount of Each Disbursement this Period

[REDACTED] 4365.65

Memo Item

Full Name (Last, First, Middle Initial)

**C. Gusto**

Mailing Address 525 20th St

City San Francisco State CA Zip Code 94107-4345

Purpose of Disbursement

Reimbursement

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	2		2	2		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : 500433062

Amount of Each Disbursement this Period

[REDACTED] 36.15

Memo Item

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

[REDACTED] 4401.80

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

[REDACTED]



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A. Brown, Evan, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 965 Florida Ave NW  
Apt 728

City Washington State DC Zip Code 20001-5587

Purpose of Disbursement  
Cell Phone Reimbursement

Candidate Name

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

State: District:

Date of Disbursement: 02 / 22 / 2024

FEC Identification Number: C  
Transaction ID : 500433061  
Amount of Each Disbursement this Period: 36.15

Memo Item \*

**B. Gusto**

Full Name (Last, First, Middle Initial)

Mailing Address 525 20th St

City San Francisco State CA Zip Code 94107-4345

Purpose of Disbursement  
Payroll Salary

Candidate Name

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

State: District:

Date of Disbursement: 02 / 22 / 2024

FEC Identification Number: C  
Transaction ID : 500433072  
Amount of Each Disbursement this Period: 8411.45

Memo Item

**C. Bailey, Ernest, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 1827 Kilbourne PI NW

City Washington State DC Zip Code 20010-2622

Purpose of Disbursement  
Salary

Candidate Name

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

State: District:

Date of Disbursement: 02 / 22 / 2024

FEC Identification Number: C  
Transaction ID : 500433068  
Amount of Each Disbursement this Period: 2248.39

Memo Item \*

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	8411.45
<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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Congressional Progressive Caucus PAC**

Full Name (Last, First, Middle Initial)

**A. Brown, Evan, , ,**

Mailing Address 965 Florida Ave NW  
Apt 728

City  
Washington

State  
DC

Zip Code  
20001-5587

Purpose of Disbursement

Salary

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	2		2	2		2	0	2	4

FEC Identification Number

C [REDACTED]

**Transaction ID : 500433069**

Amount of Each Disbursement this Period

[REDACTED] 3440.17

Memo Item \*

Full Name (Last, First, Middle Initial)

**B. Darner, Michael, , ,**

Mailing Address 1303 John St

City  
Baltimore

State  
MD

Zip Code  
21217-4116

Purpose of Disbursement

Salary

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	2		2	2		2	0	2	4

FEC Identification Number

C [REDACTED]

**Transaction ID : 500433070**

Amount of Each Disbursement this Period

[REDACTED] 787.33

Memo Item \*

Full Name (Last, First, Middle Initial)

**C. Hines, Gillian, , ,**

Mailing Address 2778 N Milwaukee Ave  
Apt 217

City  
Chicago

State  
IL

Zip Code  
60647-1323

Purpose of Disbursement

Salary

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	2		2	2		2	0	2	4

FEC Identification Number

C [REDACTED]

**Transaction ID : 500433071**

Amount of Each Disbursement this Period

[REDACTED] 1935.56

Memo Item \*

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

[REDACTED] 0.00

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

[REDACTED]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Congressional Progressive Caucus PAC**

Full Name (Last, First, Middle Initial)

**A. Kieloch Consulting**

Mailing Address 228 2nd St SE

City  
Washington

State  
DC

Zip Code  
20003-1943

Purpose of Disbursement  
Fundraising Consulting Services

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:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		01		2024

FEC Identification Number

C [REDACTED]

**Transaction ID : 500431259**

Amount of Each Disbursement this Period

[REDACTED] 4000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. LexisNexis**

Mailing Address 230 Park Ave  
FI 7

City  
New York

State  
NY

Zip Code  
10169-0935

Purpose of Disbursement  
Subscription

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:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		05		2024

FEC Identification Number

C [REDACTED]

**Transaction ID : 500431822**

Amount of Each Disbursement this Period

[REDACTED] 355.10

Memo Item

Full Name (Last, First, Middle Initial)

**C. Olson Remcho LLP**

Mailing Address 555 Capitol Mall  
Ste 400

City  
Sacramento

State  
CA

Zip Code  
95814-4503

Purpose of Disbursement  
Legal Services

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:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		12		2024

FEC Identification Number

C [REDACTED]

**Transaction ID : 500432160**

Amount of Each Disbursement this Period

[REDACTED] 378.00

Memo Item

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

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

[REDACTED] 4733.10

[REDACTED]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Congressional Progressive Caucus PAC**

Full Name (Last, First, Middle Initial)

### A. Ridgewells Catering

Mailing Address 5525 Dorsey Ln

City  
Bethesda

State  
MD

Zip Code  
20816-1501

Purpose of Disbursement

Catering

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:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	13	/	2024

FEC Identification Number

C [ ]

**Transaction ID : 500433057**

Amount of Each Disbursement this Period

[ ] 1167.60 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

### B. Silversmith Strategies LLC

Mailing Address 1461 W Grand Ave  
Apt 4

City  
Chicago

State  
IL

Zip Code  
60642-8534

Purpose of Disbursement

Strategic Consulting

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:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	06	/	2024

FEC Identification Number

C [ ]

**Transaction ID : 500431815**

Amount of Each Disbursement this Period

[ ] 6000.00 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

### C. TVEyes

Mailing Address 1150 Post Rd

City  
Fairfield

State  
CT

Zip Code  
06824-6006

Purpose of Disbursement

Media Monitoring Services

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:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	06	/	2024

FEC Identification Number

C [ ]

**Transaction ID : 500431816**

Amount of Each Disbursement this Period

[ ] 1750.00 [ ]

Memo Item

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

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

[ ] 8917.60 [ ]

[ ] 135469.64 [ ]

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

Use separate schedule(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"/> 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)

**Congressional Progressive Caucus PAC**

Full Name (Last, First, Middle Initial)

**A. EVAN LOW FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	12	/	2024

Mailing Address 1700 Tribute Rd  
Ste 201

City Sacramento State CA Zip Code 95815-4415

FEC Identification Number

**C** C00858969

**Transaction ID : 500432161**

Amount of Each Disbursement this Period

5000.00

Memo Item

Purpose of Disbursement

Contribution

Candidate Name

LOW, EVAN, , ,

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: CA District: 16

Full Name (Last, First, Middle Initial)

**B. JOE KERR FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	13	/	2024

Mailing Address 29 Palma Vly

City Coto De Caza State CA Zip Code 92679-4735

FEC Identification Number

**C** C00840041

**Transaction ID : 500432163**

Amount of Each Disbursement this Period

5000.00

Memo Item

Purpose of Disbursement

Contribution

Candidate Name

KERR, JOSEPH, , ,

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: CA District: 40

Full Name (Last, First, Middle Initial)

**C. LAURA FRIEDMAN FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	13	/	2024

Mailing Address PO Box 27296

City Los Angeles State CA Zip Code 90027-0296

FEC Identification Number

**C** C00831321

**Transaction ID : 500432162**

Amount of Each Disbursement this Period

5000.00

Memo Item

Purpose of Disbursement

Contribution

Candidate Name

FRIEDMAN, LAURA, , ,

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: CA District: 30

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

15000.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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)

**Congressional Progressive Caucus PAC**

Full Name (Last, First, Middle Initial)

**A. LEE, SHEILA JACKSON**

Mailing Address 4412 Alameda Rd

City  
Houston

State  
TX

Zip Code  
77004-4902

Purpose of Disbursement

Contribution

Candidate Name

LEE, SHEILA JACKSON, , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: TX District: 18

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	07	/	2024

FEC Identification Number

**C** C00287904

**Transaction ID : 500431819**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. LUZ RIVAS FOR CONGRESS**

Mailing Address PO Box 341533

City  
Arleta

State  
CA

Zip Code  
91334-1533

Purpose of Disbursement

Contribution

Candidate Name

RIVAS, LUZ, , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify)

State: CA District: 29

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	13	/	2024

FEC Identification Number

**C** C00857417

**Transaction ID : 500432164**

Amount of Each Disbursement this Period

5000.00

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

FEC Identification Number

**C**

Amount of Each Disbursement this Period

Memo Item

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

10000.00

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

25000.00

**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"/> 26	<input type="checkbox"/> 27
<input checked="" 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)

**Congressional Progressive Caucus PAC**

Full Name (Last, First, Middle Initial)

**A. Baker, Valerie Lyn, , ,**

Mailing Address 1329 Del Mar Dr

City  
Poinciana

State  
FL

Zip Code  
34759-6144

Purpose of Disbursement

Refund

Candidate Name

010
Category/ Type

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
02		12		2024

FEC Identification Number

**C** \_\_\_\_\_  
**Transaction ID : 500432019**  
Amount of Each Disbursement this Period  
\_\_\_\_\_ 250.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Chatterje, Nithiananda, , ,**

Mailing Address 57 Dover Grn

City  
Staten Island

State  
NY

Zip Code  
10312-1705

Purpose of Disbursement

Refund

Candidate Name

010
Category/ Type

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
02		12		2024

FEC Identification Number

**C** \_\_\_\_\_  
**Transaction ID : 500432021**  
Amount of Each Disbursement this Period  
\_\_\_\_\_ 1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Fleming, Ginny, , ,**

Mailing Address 530 Rayburn Ave

City  
Wake Forest

State  
NC

Zip Code  
27587-2812

Purpose of Disbursement

Refund

Candidate Name

010
Category/ Type

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
02		26		2024

FEC Identification Number

**C** \_\_\_\_\_  
**Transaction ID : 500433655**  
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)..... ▶

2250.00

**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"/> 26	<input type="checkbox"/> 27
<input checked="" 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)

**Congressional Progressive Caucus PAC**

Full Name (Last, First, Middle Initial)

**A. Getsinger, Gretchen, , ,**

Mailing Address 76 Brookside Ave  
# 1

City  
Torrington

State  
CT

Zip Code  
06790-5405

Purpose of Disbursement

Refund

Candidate Name

010

Category/  
Type

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
02		05		2024

FEC Identification Number

C

**Transaction ID : 500431709**

Amount of Each Disbursement this Period

300.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Henry, George, , ,**

Mailing Address 2001 21st St

City  
Belleville

State  
KS

Zip Code  
66935-2311

Purpose of Disbursement

Refund

Candidate Name

010

Category/  
Type

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
02		29		2024

FEC Identification Number

C

**Transaction ID : 500433661**

Amount of Each Disbursement this Period

250.00

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

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

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

550.00

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

2800.00