

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

Need To Impeach

ADDRESS (number and street) 1787 Tribute Road, Suite K

Check if different than previously reported. (ACC) Sacramento CA 95815

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

C C00658526

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on M M / D D / Y Y Y Y Y Y in the State of

- (d) 30-Day POST-Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y Y Y 04 / 01 / 2020 through M M / D D / Y Y Y Y Y Y 06 / 30 / 2020

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Deane, Shawnda, , ,

Type or Print Name of Treasurer _____

Signature of Treasurer Deane, Shawnda, , , [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 07 / 10 / 2020

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

| | | | | | | | | | |
|-----------------|--|--|--|--|--|--|--|--|--|
| Office Use Only | | | | | | | | | |
|-----------------|--|--|--|--|--|--|--|--|--|

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Need To Impeach

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

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|--|---|
| 6. (a) Cash on Hand January 1, <input type="text" value="2020"/> | <input type="text"/> | <input type="text" value="1488339.96"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="654373.88"/> | |
| (c) Total Receipts (from Line 19) | <input type="text" value="13491.16"/> | <input type="text" value="279110.50"/> |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | <input type="text" value="667865.04"/> | <input type="text" value="1767450.46"/> |
| 7. Total Disbursements (from Line 31)..... | <input type="text" value="48748.26"/> | <input type="text" value="1148333.68"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | <input type="text" value="619116.78"/> | <input type="text" value="619116.78"/> |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Need To Impeach

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

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 1900.00 | 4000.00 |
| (ii) Unitemized | 11591.16 | 40079.10 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶ | 13491.16 | 44079.10 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) | 13491.16 | 44079.10 |
| 12. Transfers From Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 13. All Loans Received | 0.00 | 0.00 |
| 14. Loan Repayments Received..... | 0.00 | 0.00 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 0.00 | 235025.94 |
| 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 | 5.46 |
| 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)).....▶ | 13491.16 | 279110.50 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶ | 13491.16 | 279110.50 |

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 | 48738.26 | 1148323.68 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 48738.26 | 1148323.68 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 0.00 | 0.00 |
| 24. Independent Expenditures (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Party Expenditures (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 | 10.00 | 10.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... | 10.00 | 10.00 |
| 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)) .. | 48748.26 | 1148333.68 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 48748.26 | 1148333.68 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

| III. Net Contributions/ Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|---------------------------------------|---|
| 33. Total Contributions (other than loans) (from Line 11(d), page 3) | 13491.16 | 44079.10 |
| 34. Total Contribution Refunds (from Line 28(d)) | 10.00 | 10.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 13481.16 | 44069.10 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 48738.26 | 1148323.68 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 235025.94 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 48738.26 | 913297.74 |

**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 56 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

NAME OF COMMITTEE (In Full)
Need To Impeach

A. Frieder, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. Box 1309
 City Topanga State CA Zip Code 90290
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Richard Frieder Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **04 / 28 / 2020**
Transaction ID : IDTA4781
 Amount of Each Receipt this Period 100.00
 Memo Item

B. ActBlue
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 Arrow Street
 City Cambridge State MA Zip Code 02138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 44222.33

Date of Receipt **04 / 30 / 2020**
Transaction ID : INCA2736IDTA4781
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Frieder, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. Box 1309
 City Topanga State CA Zip Code 90290
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Richard Frieder Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **05 / 28 / 2020**
Transaction ID : IDTA4809
 Amount of Each Receipt this Period 100.00
 Memo Item

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 200.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

Form/Schedule: SA11AI

Transaction ID : IDTA4781

Earmarked through ActBlue

Form/Schedule: SA11AI

Transaction ID: INCA2736IDTA4781

Total earmarked through Conduit PAC limit not affected

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

Form/Schedule: SA11AI

Transaction ID : IDTA4809

Earmarked through ActBlue

Form/Schedule:

Transaction ID:

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

| | | |
|---|---|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 9 OF 56 |
| | <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)
Need To Impeach

A. ActBlue

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14 Arrow Street

| | | |
|-------------------|-------------|-------------------|
| City Cambridge | State MA | Zip Code 02138 |
|-------------------|-------------|-------------------|

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
44222.33

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2020

Transaction ID : INCA2778IDTA4809

Amount of Each Receipt this Period
100.00

Memo Item

B. Frieder, Richard, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. Box 1309

| | | |
|-----------------|-------------|-------------------|
| City Topanga | State CA | Zip Code 90290 |
|-----------------|-------------|-------------------|

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

| | |
|--|--|
| Name of Employer (for Individual) Richard Frieder | Occupation (for Individual) Physician |
|--|--|

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
 06 / 28 / 2020

Transaction ID : IDTA4805

Amount of Each Receipt this Period
100.00

Memo Item

C. ActBlue

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14 Arrow Street

| | | |
|-------------------|-------------|-------------------|
| City Cambridge | State MA | Zip Code 02138 |
|-------------------|-------------|-------------------|

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
44222.33

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 28 / 2020

Transaction ID : INCA2773IDTA4805

Amount of Each Receipt this Period
100.00

Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 100.00 |
| TOTAL This Period (last page this line number only)..... | |

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

Form/Schedule: SA11AI

Transaction ID : INCA2778IDTA4809

Total earmarked through Conduit PAC limit not affected

Form/Schedule: SA11AI

Transaction ID: IDTA4805

Earmarked through ActBlue

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

Form/Schedule: SA11AI

Transaction ID : INCA2773IDTA4805

Total earmarked through Conduit PAC limit not affected

Form/Schedule:

Transaction ID:

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 12 OF 56 |
| | <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)
Need To Impeach

A. Katawczik, Dennis, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 409 Avonworth Heights Drive
 City Pittsburgh State PA Zip Code 15237
 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 04 / 30 / 2020
Transaction ID : IDTA4782
 Amount of Each Receipt this Period 100.00
 Memo Item

B. ActBlue
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 Arrow Street
 City Cambridge State MA Zip Code 02138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 44222.33

Date of Receipt 04 / 30 / 2020
Transaction ID : INCA2736IDTA4782
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Katawczik, Dennis, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 409 Avonworth Heights Drive
 City Pittsburgh State PA Zip Code 15237
 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 05 / 31 / 2020
Transaction ID : IDTA4810
 Amount of Each Receipt this Period 100.00
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 200.00 |
| TOTAL This Period (last page this line number only)..... | |

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : IDTA4782

Earmarked through ActBlue

Form/Schedule: SA11AI

Transaction ID: INCA2736IDTA4782

Total earmarked through Conduit PAC limit not affected

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

Form/Schedule: SA11AI

Transaction ID : IDTA4810

Earmarked through ActBlue

Form/Schedule:

Transaction ID:

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

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 15 OF 56 |
| | <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)
Need To Impeach

A. ActBlue
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 14 Arrow Street

| | | |
|-------------------|-------------|-------------------|
| City Cambridge | State MA | Zip Code 02138 |
|-------------------|-------------|-------------------|

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
44222.33

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2020
Transaction ID : INCA2778IDTA4810

Amount of Each Receipt this Period
100.00

Memo Item

B. Parfitt, Richard, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 626 Ondossagon Way

| | | |
|-----------------|-------------|-------------------|
| City Madison | State WI | Zip Code 53719 |
|-----------------|-------------|-------------------|

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

Name of Employer (for Individual) Occupation (for Individual)
Richard Parfitt Physician

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
 04 / 03 / 2020
Transaction ID : IDTA4772

Amount of Each Receipt this Period
100.00

Memo Item

C. ActBlue
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 14 Arrow Street

| | | |
|-------------------|-------------|-------------------|
| City Cambridge | State MA | Zip Code 02138 |
|-------------------|-------------|-------------------|

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
44222.33

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 05 / 2020
Transaction ID : INCA2724IDTA4772

Amount of Each Receipt this Period
100.00

Memo Item

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 100.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

Form/Schedule: SA11AI

Transaction ID : INCA2778IDTA4810

Total earmarked through Conduit PAC limit not affected

Form/Schedule: SA11AI

Transaction ID: IDTA4772

Earmarked through ActBlue

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

Form/Schedule: SA11AI

Transaction ID : INCA2724IDTA4772

Total earmarked through Conduit PAC limit not affected

Form/Schedule:

Transaction ID:

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

| | | | |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 18 OF 56 |
| <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)
Need To Impeach

A. Parfitt, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 626 Ondossagon Way
 City Madison State WI Zip Code 53719
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Richard Parfitt Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 05 / 03 / 2020
Transaction ID : IDTA4785
 Amount of Each Receipt this Period 100.00
 Memo Item

B. ActBlue
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 Arrow Street
 City Cambridge State MA Zip Code 02138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 44222.33

Date of Receipt 05 / 03 / 2020
Transaction ID : INCA2743IDTA4785
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Parfitt, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 626 Ondossagon Way
 City Madison State WI Zip Code 53719
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Richard Parfitt Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 03 / 2020
Transaction ID : IDTA4800
 Amount of Each Receipt this Period 100.00
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 200.00 |
| TOTAL This Period (last page this line number only)..... | |

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : IDTA4785

Earmarked through ActBlue

Form/Schedule: SA11AI

Transaction ID: INCA2743IDTA4785

Total earmarked through Conduit PAC limit not affected

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

Form/Schedule: SA11AI

Transaction ID : IDTA4800

Earmarked through ActBlue

Form/Schedule:

Transaction ID:

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

| | | |
|---|---|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 21 OF 56 |
| | <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)
Need To Impeach

A. ActBlue

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14 Arrow Street

| | | |
|-------------------|-------------|-------------------|
| City Cambridge | State MA | Zip Code 02138 |
|-------------------|-------------|-------------------|

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
44222.33

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2020

Transaction ID : INCA2767IDTA4800

Amount of Each Receipt this Period
100.00

Memo Item

B. Shell, Michael, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 416 Queens Road, Apt. 5

| | | |
|-------------------|-------------|-------------------|
| City Charlotte | State NC | Zip Code 28207 |
|-------------------|-------------|-------------------|

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 ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 03 / 2020

Transaction ID : IDTA4773

Amount of Each Receipt this Period
100.00

Memo Item

C. ActBlue

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14 Arrow Street

| | | |
|-------------------|-------------|-------------------|
| City Cambridge | State MA | Zip Code 02138 |
|-------------------|-------------|-------------------|

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
44222.33

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 05 / 2020

Transaction ID : INCA2724IDTA4773

Amount of Each Receipt this Period
100.00

Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 100.00 |
| TOTAL This Period (last page this line number only)..... | |

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

Form/Schedule: SA11AI

Transaction ID : INCA2767IDTA4800

Total earmarked through Conduit PAC limit not affected

Form/Schedule: SA11AI

Transaction ID: IDTA4773

Earmarked through ActBlue

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

Form/Schedule: SA11AI

Transaction ID : INCA2724IDTA4773

Total earmarked through Conduit PAC limit not affected

Form/Schedule:

Transaction ID:

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

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 24 OF 56 |
| | (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 |

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)
Need To Impeach

A. Shell, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 416 Queens Road, Apt. 5
 City Charlotte State NC Zip Code 28207
 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 ▼ 600.00

Date of Receipt 05 / 03 / 2020
Transaction ID : IDTA4786
 Amount of Each Receipt this Period 100.00
 Memo Item

B. ActBlue
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 Arrow Street
 City Cambridge State MA Zip Code 02138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 44222.33

Date of Receipt 05 / 03 / 2020
Transaction ID : INCA2743IDTA4786
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Shell, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 416 Queens Road, Apt. 5
 City Charlotte State NC Zip Code 28207
 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 ▼ 600.00

Date of Receipt 06 / 03 / 2020
Transaction ID : IDTA4799
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

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

Form/Schedule: SA11AI

Transaction ID : IDTA4786

Earmarked through ActBlue

Form/Schedule: SA11AI

Transaction ID: INCA2743IDTA4786

Total earmarked through Conduit PAC limit not affected

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

Form/Schedule: SA11AI

Transaction ID : IDTA4799

Earmarked through ActBlue

Form/Schedule:

Transaction ID:

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 27 OF 56 |
| | <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)
Need To Impeach

A. ActBlue

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14 Arrow Street

| | | |
|-------------------|-------------|-------------------|
| City Cambridge | State MA | Zip Code 02138 |
|-------------------|-------------|-------------------|

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
44222.33

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | | 07 | | 2020 |

Transaction ID : INCA2767IDTA4799

Amount of Each Receipt this Period
100.00

Memo Item

B. Taylor, Douglas, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7343 Paseo Verde

| | | |
|------------------|-------------|-------------------|
| City Carlsbad | State CA | Zip Code 92009 |
|------------------|-------------|-------------------|

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

Name of Employer (for Individual) Occupation (for Individual)
n/a Not Employed

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 |
| 04 | | 30 | | 2020 |

Transaction ID : IDTA4783

Amount of Each Receipt this Period
100.00

Memo Item

C. ActBlue

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14 Arrow Street

| | | |
|-------------------|-------------|-------------------|
| City Cambridge | State MA | Zip Code 02138 |
|-------------------|-------------|-------------------|

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
44222.33

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | | 30 | | 2020 |

Transaction ID : INCA2736IDTA4783

Amount of Each Receipt this Period
100.00

Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 100.00 |
| TOTAL This Period (last page this line number only)..... | |

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : INCA2767IDTA4799

Total earmarked through Conduit PAC limit not affected

Form/Schedule: SA11AI

Transaction ID: IDTA4783

Earmarked through ActBlue

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

Form/Schedule: SA11AI

Transaction ID : INCA2736IDTA4783

Total earmarked through Conduit PAC limit not affected

Form/Schedule:

Transaction ID:

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 30 OF 56 |
| | <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)
Need To Impeach

A. Taylor, Douglas, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7343 Paseo Verde

| | | |
|------------------|-------------|-------------------|
| City Carlsbad | State CA | Zip Code 92009 |
|------------------|-------------|-------------------|

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 ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2020

Transaction ID : IDTA4811

Amount of Each Receipt this Period
100.00

Memo Item

B. ActBlue

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14 Arrow Street

| | | |
|-------------------|-------------|-------------------|
| City Cambridge | State MA | Zip Code 02138 |
|-------------------|-------------|-------------------|

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
44222.33

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2020

Transaction ID : INCA2778IDTA4811

Amount of Each Receipt this Period
100.00

Memo Item

C. Taylor, Douglas, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7343 Paseo Verde

| | | |
|------------------|-------------|-------------------|
| City Carlsbad | State CA | Zip Code 92009 |
|------------------|-------------|-------------------|

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 ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2020

Transaction ID : IDTA4807

Amount of Each Receipt this Period
100.00

Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 200.00 |
| TOTAL This Period (last page this line number only)..... | |

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : IDTA4811

Earmarked through ActBlue

Form/Schedule: SA11AI

Transaction ID: INCA2778IDTA4811

Total earmarked through Conduit PAC limit not affected

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

Form/Schedule: SA11AI

Transaction ID : IDTA4807

Earmarked through ActBlue

Form/Schedule:

Transaction ID:

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

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 33 OF 56 |
| | <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)
Need To Impeach

A. ActBlue

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14 Arrow Street

| | | |
|-------------------|-------------|-------------------|
| City Cambridge | State MA | Zip Code 02138 |
|-------------------|-------------|-------------------|

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
44222.33

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2020

Transaction ID : INCA2776IDTA4807

Amount of Each Receipt this Period
100.00

Memo Item

B. Tompkins, Helen, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 61135 Ambassador Drive

| | | |
|--------------|-------------|-------------------|
| City Bend | State OR | Zip Code 97702 |
|--------------|-------------|-------------------|

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

Name of Employer (for Individual) Occupation (for Individual)
Helen Tompkins Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2020

Transaction ID : IDTA4778

Amount of Each Receipt this Period
100.00

Memo Item

C. ActBlue

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14 Arrow Street

| | | |
|-------------------|-------------|-------------------|
| City Cambridge | State MA | Zip Code 02138 |
|-------------------|-------------|-------------------|

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
44222.33

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 19 / 2020

Transaction ID : INCA2732IDTA4778

Amount of Each Receipt this Period
100.00

Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 100.00 |
| TOTAL This Period (last page this line number only)..... | |

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

Form/Schedule: SA11AI

Transaction ID : INCA2776IDTA4807

Total earmarked through Conduit PAC limit not affected

Form/Schedule: SA11AI

Transaction ID: IDTA4778

Earmarked through ActBlue

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

Form/Schedule: SA11AI

Transaction ID : INCA2732IDTA4778

Total earmarked through Conduit PAC limit not affected

Form/Schedule:

Transaction ID:

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

| | | |
|---|---|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 36 OF 56 |
| | <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)
Need To Impeach

A. Tompkins, Helen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 61135 Ambassador Drive
 City Bend State OR Zip Code 97702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Helen Tompkins Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 17 / 2020
Transaction ID : IDTA4790
 Amount of Each Receipt this Period 100.00
 Memo Item

B. ActBlue
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 Arrow Street
 City Cambridge State MA Zip Code 02138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 44222.33

Date of Receipt 05 / 17 / 2020
Transaction ID : INCA2759IDTA4790
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Williamson, Stephen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3000 Pacific Avenue
 City San Francisco State CA Zip Code 94115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Forager Project Occupation (for Individual) Chief Executive Officer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 04 / 07 / 2020
Transaction ID : IDTA4775
 Amount of Each Receipt this Period 100.00
 Memo Item

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 200.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

Form/Schedule: SA11AI

Transaction ID : IDTA4790

Earmarked through ActBlue

Form/Schedule: SA11AI

Transaction ID: INCA2759IDTA4790

Total earmarked through Conduit PAC limit not affected

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

Form/Schedule: SA11AI

Transaction ID : IDTA4775

Earmarked through ActBlue

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 39 OF 56
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Need To Impeach

A. ActBlue
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 Arrow Street
 City Cambridge State MA Zip Code 02138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 44222.33

Date of Receipt 04 / 12 / 2020
Transaction ID : INCA2729IDTA4775
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Williamson, Stephen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3000 Pacific Avenue
 City San Francisco State CA Zip Code 94115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Forager Project Chief Executive Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 05 / 07 / 2020
Transaction ID : IDTA4788
 Amount of Each Receipt this Period 100.00
 Memo Item

C. ActBlue
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 Arrow Street
 City Cambridge State MA Zip Code 02138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 44222.33

Date of Receipt 05 / 10 / 2020
Transaction ID : INCA2755IDTA4788
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : INCA2729IDTA4775

Total earmarked through Conduit PAC limit not affected

Form/Schedule: SA11AI

Transaction ID: IDTA4788

Earmarked through ActBlue

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

Form/Schedule: SA11AI

Transaction ID : INCA2755IDTA4788

Total earmarked through Conduit PAC limit not affected

Form/Schedule:

Transaction ID:

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

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 42 OF 56 |
| | <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)
Need To Impeach

A. Williamson, Stephen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3000 Pacific Avenue
 City San Francisco State CA Zip Code 94115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Forager Project Occupation (for Individual) Chief Executive Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 07 / 2020
Transaction ID : IDTA4801
 Amount of Each Receipt this Period 100.00
 Memo Item

B. ActBlue
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 Arrow Street
 City Cambridge State MA Zip Code 02138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 44222.33

Date of Receipt 06 / 07 / 2020
Transaction ID : INCA2767IDTA4801
 Amount of Each Receipt this Period 100.00
 Memo Item

C.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)

Date of Receipt
 Amount of Each Receipt this Period
 Memo Item

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 100.00 |
| TOTAL This Period (last page this line number only)..... | 1900.00 |

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : IDTA4801

Earmarked through ActBlue

Form/Schedule: SA11AI

Transaction ID: INCA2767IDTA4801

Total earmarked through Conduit PAC limit not affected

**SCHEDULE B (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)

Need To Impeach

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144

Purpose of Disbursement
Merchant Fees

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : EXPB2725
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144

Purpose of Disbursement
Merchant Fees

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : EXPB2730
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144

Purpose of Disbursement
Merchant Fees

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : EXPB2731
Amount of Each Disbursement this Period

Memo Item

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

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input 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)
Need To Impeach

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) A. ActBlue Technical Services | | Date of Disbursement MM / DD / YYYY 04 / 26 / 2020 | |
| Mailing Address 366 Summer Street | | FEC Identification Number C [REDACTED] Transaction ID : EXPB2735 | |
| City Somerville | State MA | Zip Code 02144 | Amount of Each Disbursement this Period 41.25 |
| Purpose of Disbursement Merchant Fees | | Category/ Type 001 | Memo Item <input type="checkbox"/> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | | |

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) B. ActBlue Technical Services | | Date of Disbursement MM / DD / YYYY 04 / 30 / 2020 | |
| Mailing Address 366 Summer Street | | FEC Identification Number C [REDACTED] Transaction ID : EXPB2737 | |
| City Somerville | State MA | Zip Code 02144 | Amount of Each Disbursement this Period 36.74 |
| Purpose of Disbursement Merchant Fees | | Category/ Type 001 | Memo Item <input type="checkbox"/> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | | |

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) C. ActBlue Technical Services | | Date of Disbursement MM / DD / YYYY 05 / 03 / 2020 | |
| Mailing Address 366 Summer Street | | FEC Identification Number C [REDACTED] Transaction ID : EXPB2742 | |
| City Somerville | State MA | Zip Code 02144 | Amount of Each Disbursement this Period 23.66 |
| Purpose of Disbursement Merchant Fees | | Category/ Type 001 | Memo Item <input type="checkbox"/> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | | |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 101.65 |
| TOTAL This Period (last page this line number only).....▶ | |

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

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

FOR LINE NUMBER: (check only one)

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input 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)
Need To Impeach

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. ActBlue Technical Services | | Date of Disbursement MM / DD / YYYY 05 / 10 / 2020 |
| Mailing Address 366 Summer Street | | FEC Identification Number C [REDACTED] Transaction ID : EXPB2756 |
| City Somerville | State MA | Zip Code 02144 |
| Purpose of Disbursement Merchant Fees | Candidate Name | Amount of Each Disbursement this Period 45.12 |
| 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) ▼ | <input type="checkbox"/> Memo Item |
| State: District: | Category/Type 001 | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. ActBlue Technical Services | | Date of Disbursement MM / DD / YYYY 05 / 17 / 2020 |
| Mailing Address 366 Summer Street | | FEC Identification Number C [REDACTED] Transaction ID : EXPB2760 |
| City Somerville | State MA | Zip Code 02144 |
| Purpose of Disbursement Merchant Fees | Candidate Name | Amount of Each Disbursement this Period 33.83 |
| 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) ▼ | <input type="checkbox"/> Memo Item |
| State: District: | Category/Type 001 | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. ActBlue Technical Services | | Date of Disbursement MM / DD / YYYY 05 / 24 / 2020 |
| Mailing Address 366 Summer Street | | FEC Identification Number C [REDACTED] Transaction ID : EXPB2763 |
| City Somerville | State MA | Zip Code 02144 |
| Purpose of Disbursement Merchant Fees | Candidate Name | Amount of Each Disbursement this Period 34.11 |
| 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) ▼ | <input type="checkbox"/> Memo Item |
| State: District: | Category/Type 001 | |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 113.06 |
| 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)
Need To Impeach

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. ActBlue Technical Services | | Date of Disbursement MM / DD / YYYY 05 / 31 / 2020 |
| Mailing Address 366 Summer Street | | FEC Identification Number C [REDACTED] Transaction ID : EXPB2766 |
| City Somerville | State MA | Zip Code 02144 |
| Purpose of Disbursement Merchant Fees | Category/Type 001 | Amount of Each Disbursement this Period 43.21 |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | <input type="checkbox"/> Memo Item |
| State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. ActBlue Technical Services | | Date of Disbursement MM / DD / YYYY 06 / 07 / 2020 |
| Mailing Address 366 Summer Street | | FEC Identification Number C [REDACTED] Transaction ID : EXPB2768 |
| City Somerville | State MA | Zip Code 02144 |
| Purpose of Disbursement Merchant Fees | Category/Type 001 | Amount of Each Disbursement this Period 46.52 |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | <input type="checkbox"/> Memo Item |
| State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. ActBlue Technical Services | | Date of Disbursement MM / DD / YYYY 06 / 14 / 2020 |
| Mailing Address 366 Summer Street | | FEC Identification Number C [REDACTED] Transaction ID : EXPB2770 |
| City Somerville | State MA | Zip Code 02144 |
| Purpose of Disbursement Merchant Fees | Category/Type 001 | Amount of Each Disbursement this Period 30.12 |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | <input type="checkbox"/> Memo Item |
| State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 119.85 |
| 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)

Need To Impeach

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144

Purpose of Disbursement Merchant Fees

Category/Type

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 Y Y
 06 / 21 / 2020

FEC Identification Number

Transaction ID : EXPB2772
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144

Purpose of Disbursement Merchant Fees

Category/Type

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 Y Y
 06 / 28 / 2020

FEC Identification Number

Transaction ID : EXPB2774
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144

Purpose of Disbursement Merchant Fees

Category/Type

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 Y Y
 06 / 30 / 2020

FEC Identification Number

Transaction ID : EXPB2777
 Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input 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)
Need To Impeach

A. Deane & Company

Full Name (Last, First, Middle Initial)

Mailing Address 1787 Tribute Road, Suite K

City Sacramento State CA Zip Code 95815

Purpose of Disbursement Reporting Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 08 / 2020

FEC Identification Number: C

Transaction ID : EXPB2722

Amount of Each Disbursement this Period: 1842.05

Memo Item

B. Deane & Company

Full Name (Last, First, Middle Initial)

Mailing Address 1787 Tribute Road, Suite K

City Sacramento State CA Zip Code 95815

Purpose of Disbursement Reporting Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 07 / 2020

FEC Identification Number: C

Transaction ID : EXPB2741

Amount of Each Disbursement this Period: 1566.16

Memo Item

C. Deane & Company

Full Name (Last, First, Middle Initial)

Mailing Address 1787 Tribute Road, Suite K

City Sacramento State CA Zip Code 95815

Purpose of Disbursement Reporting Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 05 / 2020

FEC Identification Number: C

Transaction ID : EXPB2761

Amount of Each Disbursement this Period: 1524.35

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 4932.56

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)

Need To Impeach

Full Name (Last, First, Middle Initial)

A. DMM Foothill, LLC

Mailing Address 1670 Zanker Road, Suite B

City San Jose State CA Zip Code 95112

Purpose of Disbursement Rent

Category/Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : EXPB2739
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Prepaid Expense Card Solutions, Inc. (PEX)

Mailing Address 462 7th Avenue, 21st Floor

City New York State NY Zip Code 10018

Purpose of Disbursement Credit Card Payment

Category/Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : EXPB2733
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. WP Engine

Mailing Address 504 Lavaca Street, Suite 1000

City Austin State TX Zip Code 78701

Purpose of Disbursement Website

Category/Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : EDTB5EXPB
 Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input 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)

Need To Impeach

Full Name (Last, First, Middle Initial)

A. Zoom Video Communications

Mailing Address 55 Almaden Blvd., 6th Floor

City San Jose State CA Zip Code 95113

Purpose of Disbursement
Phone Conference

001
Category/
Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
04 / 28 / 2020

FEC Identification Number
C
Transaction ID : EDTB4EXPB;
Amount of Each Disbursement this Period
200.90

Memo Item

Full Name (Last, First, Middle Initial)

B. Prepaid Expense Card Solutions, Inc. (PEX)

Mailing Address 462 7th Avenue, 21st Floor

City New York State NY Zip Code 10018

Purpose of Disbursement
Credit Card Payment

001
Category/
Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
05 / 01 / 2020

FEC Identification Number
C
Transaction ID : EXPB2740
Amount of Each Disbursement this Period
1779.98

Memo Item

Full Name (Last, First, Middle Initial)

C. GitHub

Mailing Address 88 Colin P Kelly Jr. Street

City San Francisco State CA Zip Code 94107

Purpose of Disbursement
Website

001
Category/
Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
05 / 01 / 2020

FEC Identification Number
C
Transaction ID : EDTB9EXPB
Amount of Each Disbursement this Period
44.00

Memo Item

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

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

1779.98

**SCHEDULE B (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)

Need To Impeach

Full Name (Last, First, Middle Initial)

A. Google Suite

Mailing Address 1600 Amphitheatre Parkway

City Mountain View

State CA

Zip Code 94043

Purpose of Disbursement
Subscription

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 01 / 2020

FEC Identification Number

C [REDACTED]

Transaction ID : EDTB6EXPB2
Amount of Each Disbursement this Period

[REDACTED] 1704.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Zoom Video Communications

Mailing Address 55 Almaden Blvd., 6th Floor

City San Jose

State CA

Zip Code 95113

Purpose of Disbursement
Phone Conference

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 01 / 2020

FEC Identification Number

C [REDACTED]

Transaction ID : EDTB7EXPB2
Amount of Each Disbursement this Period

[REDACTED] 2.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Zoom Video Communications

Mailing Address 55 Almaden Blvd., 6th Floor

City San Jose

State CA

Zip Code 95113

Purpose of Disbursement
Phone Conference

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 01 / 2020

FEC Identification Number

C [REDACTED]

Transaction ID : EDTB8EXPB
Amount of Each Disbursement this Period

[REDACTED] 29.98

Memo Item

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

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

[REDACTED] 0.00

[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)

Need To Impeach

Full Name (Last, First, Middle Initial)

A. Prepaid Expense Card Solutions, Inc. (PEX)

Mailing Address 462 7th Avenue, 21st Floor

City New York State NY Zip Code 10018

Purpose of Disbursement
PEX Fee

001

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 10 / 2020

FEC Identification Number

C [REDACTED]

Transaction ID : EXPB2779

Amount of Each Disbursement this Period

[REDACTED] 65.95

Memo Item

Full Name (Last, First, Middle Initial)

B. Prepaid Expense Card Solutions, Inc. (PEX)

Mailing Address 462 7th Avenue, 21st Floor

City New York State NY Zip Code 10018

Purpose of Disbursement
Credit Card Payment

001

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2020

FEC Identification Number

C [REDACTED]

Transaction ID : EXPB2781

Amount of Each Disbursement this Period

[REDACTED] 491.50

Memo Item

Full Name (Last, First, Middle Initial)

C. Bill.com

Mailing Address 1810 Embarcadero Road

City Palo Alto State CA Zip Code 94303

Purpose of Disbursement
Subscription

001

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2020

FEC Identification Number

C [REDACTED]

Transaction ID : EDTB14EXPI

Amount of Each Disbursement this Period

[REDACTED] 491.50

Memo Item

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

[REDACTED] 557.45

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 |

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)
Need To Impeach

A. Prepaid Expense Card Solutions, Inc. (PEX)

Full Name (Last, First, Middle Initial)

Mailing Address 462 7th Avenue, 21st Floor

City New York State NY Zip Code 10018

Purpose of Disbursement Credit Card Payment

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 06 / 30 / 2020

FEC Identification Number C

Transaction ID : EXPB2780

Amount of Each Disbursement this Period 1815.47

Memo Item

B. Amazon

Full Name (Last, First, Middle Initial)

Mailing Address 410 Terry Avenue N.

City Seattle State WA Zip Code 98109

Purpose of Disbursement Office Supplies

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 06 / 30 / 2020

FEC Identification Number C

Transaction ID : EDTB11EXPE

Amount of Each Disbursement this Period 35.49

Memo Item

C. Google Suite

Full Name (Last, First, Middle Initial)

Mailing Address 1600 Amphitheatre Parkway

City Mountain View State CA Zip Code 94043

Purpose of Disbursement Subscription

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 06 / 30 / 2020

FEC Identification Number C

Transaction ID : EDTB10EXPI

Amount of Each Disbursement this Period 1704.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1815.47

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)
Need To Impeach

Full Name (Last, First, Middle Initial)

A. TaxJar

Mailing Address 8677 Villa La Jolla Drive, #1107

City La Jolla State CA Zip Code 92037

Purpose of Disbursement Sales Tax

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 30 / 2020

FEC Identification Number: C

Transaction ID : EDTB12EXPE

Amount of Each Disbursement this Period: 44.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Zoom Video Communications

Mailing Address 55 Almaden Blvd., 6th Floor

City San Jose State CA Zip Code 95113

Purpose of Disbursement Phone Conference

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 30 / 2020

FEC Identification Number: C

Transaction ID : EDTB13EXPE

Amount of Each Disbursement this Period: 31.98

Memo Item

Full Name (Last, First, Middle Initial)

C. Winning Mark, LLC

Mailing Address 1220 SW Morrison Street, #910

City Portland State OR Zip Code 97205

Purpose of Disbursement Design for Online Ads

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 26 / 2020

FEC Identification Number: C

Transaction ID : EXPB2758

Amount of Each Disbursement this Period: 36867.50

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 36867.50

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)
Need To Impeach

A. Winning Mark, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 1220 SW Morrison Street, #910

City Portland State OR Zip Code 97205

Purpose of Disbursement Subscriptions

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 26 / 2020

FEC Identification Number: C

Transaction ID : EXPB2757

Amount of Each Disbursement this Period: 438.08

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

| | |
|--|----------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 438.08 |
| TOTAL This Period (last page this line number only).....▶ | 48672.26 |