

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.
PROGRESSIVE CHOICES PAC

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

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

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

5. Covering Period / / through / /

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

Type or Print Name of Treasurer Karen Lennon

Signature of Treasurer Karen Lennon [Electronically Filed] Date / /

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

PROGRESSIVE CHOICES PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>	<input type="text" value="16165.49"/>	<input type="text" value="16165.49"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="30626.63"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="39000.00"/>	<input type="text" value="77500.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="69626.63"/>	<input type="text" value="93665.49"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="11952.43"/>	<input type="text" value="35991.29"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="57674.20"/>	<input type="text" value="57674.20"/>
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

PROGRESSIVE CHOICES PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	33000.00	40500.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	33000.00	40500.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	6000.00	37000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	39000.00	77500.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	39000.00	77500.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	39000.00	77500.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	952.43	2991.29
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	952.43	2991.29
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	11000.00	32000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	1000.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	11952.43	35991.29
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	11952.43	35991.29

DETAILED SUMMARY PAGE
of Disbursements

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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)	39000.00	77500.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	39000.00	77500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	952.43	2991.29
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	952.43	2991.29

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

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

FOR LINE NUMBER: PAGE 6 OF 15
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

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

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 01 / 2015
Transaction ID : SA11AI.4179
 Amount of Each Receipt this Period
 5000.00

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

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 01 / 2015
Transaction ID : SA11AI.4177
 Amount of Each Receipt this Period
 5000.00

C. Sidney Hollander
 Full Name (Last, First, Middle Initial)
 Mailing Address 4886 N. Paulina St.
 City Chicago State IL Zip Code 60640
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 10 / 2015
Transaction ID : SA11AI.4185
 Amount of Each Receipt this Period
 1000.00

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

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

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

Mailing Address 260 E. Chestnut, No. 4302

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	01	/	2015

Transaction ID : SA11AI.4181

Amount of Each Receipt this Period
5000.00

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

Mailing Address 4713 N. LaPorte

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	01	/	2015

Transaction ID : SA11AI.4183

Amount of Each Receipt this Period
2000.00

C. Florence Crown Rothman
Full Name (Last, First, Middle Initial)

Mailing Address 180 E. Pearson Street, Apt. 6301

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	13	/	2015

Transaction ID : SA11AI.4189

Amount of Each Receipt this Period
5000.00

Conduit: ActBlue

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 15
	<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)
PROGRESSIVE CHOICES PAC

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

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 13 / 2015
Transaction ID : SA11AI.4191
 Amount of Each Receipt this Period
 5000.00
 Conduit: ActBlue

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

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 06 / 2015
Transaction ID : SA11AI.4187
 Amount of Each Receipt this Period
 5000.00
 Conduit: ActBlue

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

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

SUBTOTAL of Receipts This Page (optional).....▶	10000.00
TOTAL This Period (last page this line number only).....▶	33000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 15
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

Full Name (Last, First, Middle Initial) A. ACTBLUE		Date of Receipt
Mailing Address P.O. BOX 441146		<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>
City	State	Zip Code
SOMERVILLE	MA	02144
FEC ID number of contributing federal political committee.	<input type="text" value="C00401224"/>	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value=""/>	
		Transaction ID : SA11C.4192
		Amount of Each Receipt this Period <input type="text" value="15000.00"/>
		Total Received through Conduit this Reporting Period
		[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. American Optometric Association PAC		Date of Receipt
Mailing Address 1505 Prince Street, #300		<input type="text" value="09"/> / <input type="text" value="18"/> / <input type="text" value="2015"/>
City	State	Zip Code
Alexendria	VA	22314
FEC ID number of contributing federal political committee.	<input type="text" value="C00024968"/>	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	
		Transaction ID : SA11C.4196
		Amount of Each Receipt this Period <input type="text" value="2500.00"/>

Full Name (Last, First, Middle Initial) C. Humane Society Legislative Fund PAC		Date of Receipt
Mailing Address 2100 L Street NW Suite 310		<input type="text" value="09"/> / <input type="text" value="10"/> / <input type="text" value="2015"/>
City	State	Zip Code
Washington	DC	20037
FEC ID number of contributing federal political committee.	<input type="text" value="C00466813"/>	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1000.00"/>	
		Transaction ID : SA11C.4195
		Amount of Each Receipt this Period <input type="text" value="1000.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="3500.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 15
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

A. THE AMERICAN CONGRESS OF OB-GYNS PAC (OB-GYN PAC)
 Full Name (Last, First, Middle Initial)
 Mailing Address 409 12TH STREET, SW
 City WASHINGTON State DC Zip Code 20024
 FEC ID number of contributing federal political committee. **C** C00364158
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015
Transaction ID : SA11C.4233
 Amount of Each Receipt this Period
 2500.00

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

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

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

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

SUBTOTAL of Receipts This Page (optional).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	6000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 13 / 2015

Transaction ID : **SB21B.4200**

Amount of Each Disbursement this Period
395.00

Full Name (Last, First, Middle Initial)

B. AT&T

Mailing Address 208 Akard Street

City Dallas State TX Zip Code 75202

Purpose of Disbursement
Telephone and Internet

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 04 / 2015

Transaction ID : **SB21B.4197**

Amount of Each Disbursement this Period
59.93

Full Name (Last, First, Middle Initial)

C. Broadway 5533 LLC

Mailing Address P.O. Box 669

City Chicago State IL Zip Code 60640

Purpose of Disbursement
Office Rent

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 17 / 2015

Transaction ID : **SB21B.4202**

Amount of Each Disbursement this Period
300.00

SUBTOTAL of Disbursements This Page (optional).....▶	754.93
TOTAL This Period (last page this line number only).....▶	754.93

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

Full Name (Last, First, Middle Initial)

A. AMI BERA FOR CONGRESS

Mailing Address PO BOX 582496

City ELK GROVE State CA Zip Code 95758

Purpose of Disbursement
Contribution

Candidate Name

AMERISH BERA

Office Sought: House
 Senate
 President

State: CA District: 07

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 21 / 2015

Transaction ID : SB23.4224

Amount of Each Disbursement this Period

1000.00

Category/
Type

Full Name (Last, First, Middle Initial)

B. CAIN FOR CONGRESS

Mailing Address PO BOX 1523

City BANGOR State ME Zip Code 04402

Purpose of Disbursement
Contribution

Candidate Name

EMILY CAIN

Office Sought: House
 Senate
 President

State: ME District: 02

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 21 / 2015

Transaction ID : SB23.4228

Amount of Each Disbursement this Period

1000.00

Category/
Type

Full Name (Last, First, Middle Initial)

C. CARROLL FOR COLORADO

Mailing Address PO BOX 470783

City AURORA State CO Zip Code 80047

Purpose of Disbursement
Contribution

Candidate Name

MORGAN L. CARROLL

Office Sought: House
 Senate
 President

State: CO District: 06

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 21 / 2015

Transaction ID : SB23.4231

Amount of Each Disbursement this Period

1000.00

Category/
Type

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

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

3000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF CHERI BUSTOS

Mailing Address 1050 17TH ST NW STE 590

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement
Contribution

Candidate Name
CHERI BUSTOS

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: IL District: 17

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	21	/	2015

Transaction ID : SB23.4223

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. FRIENDS OF RAJA FOR CONGRESS

Mailing Address P.O. BOX 681202

City SCHAUMBURG State IL Zip Code 60193

Purpose of Disbursement
Contribution

Candidate Name
S. RAJA KRISHNAMOORTHY

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: IL District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	21	/	2015

Transaction ID : SB23.4222

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. KUSTER FOR CONGRESS, INC.

Mailing Address P.O. BOX 1498

City CONCORD State NH Zip Code 03302

Purpose of Disbursement
Contribution

Candidate Name
ANN MCLANE KUSTER

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	21	/	2015

Transaction ID : SB23.4225

Amount of Each Disbursement this Period

1000.00

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

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

3000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

Full Name (Last, First, Middle Initial)

A. NOLAN FOR CONGRESS VOLUNTEER COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		21		2015

Mailing Address PO BOX 1041

Transaction ID : SB23.4226

City BRAINERD State MN Zip Code 56401

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Contribution

--

Candidate Name

RICHARD M. NOLAN

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: MN District: 08

Full Name (Last, First, Middle Initial)

B. SALUD CARBAJAL FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		21		2015

Mailing Address PO BOX 1290

Transaction ID : SB23.4230

City SANTA BARBARA State CA Zip Code 93102

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Contribution

--

Candidate Name

SALUD CARBAJAL

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: CA District: 24

Full Name (Last, First, Middle Initial)

C. SCOTT PETERS FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		21		2015

Mailing Address PO BOX 75357

Transaction ID : SB23.4227

City WASHINGTON State DC Zip Code 20002

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Contribution

--

Candidate Name

SCOTT PETERS

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: CA District: 52

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

3000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

Full Name (Last, First, Middle Initial)

A. TADDEO FOR CONGRESS

Mailing Address P.O. BOX 432094

City SOUTH MIAMI State FL Zip Code 33243

Purpose of Disbursement
Contribution

Candidate Name

ANNETTE TADDEO

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: FL District: 26

Date of Disbursement

MM / DD / YYYY
09 / 21 / 2015

Transaction ID : SB23.4232

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address P.O. BOX 536926

City ORLANDO State FL Zip Code 32853

Purpose of Disbursement
Contribution

Candidate Name

VALDEZ VAL DEMINGS

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: FL District: 10

Date of Disbursement

MM / DD / YYYY
09 / 21 / 2015

Transaction ID : SB23.4229

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

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

2000.00

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

11000.00