

**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

ColorOfChange PAC

ADDRESS (number and street)

1714 Franklin St.

#100-136

Check if different
than previously
reported. (ACC)

Oakland

CA

94612

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C

C00428557

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)
(Non-Election
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)
(Non-Election
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of(d) 30-Day
POST-Election
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

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

Savado, Ismael, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Savado, Ismael, , ,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

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**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

ColorOfChange PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
08		01		2018

To:

M M	/	D D	/	Y Y Y Y Y
08		31		2018

	COLUMN A This Period	COLUMN B Calendar Year-to-Date															
6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="5">2018</td></tr></table>	Y	Y	Y	Y	Y	2018						<table><tr><td colspan="5">446861.26</td></tr></table>	446861.26				
Y	Y	Y	Y	Y													
2018																	
446861.26																	
(b) Cash on Hand at Beginning of Reporting Period.....	<table><tr><td colspan="5">688662.22</td></tr></table>	688662.22															
688662.22																	
(c) Total Receipts (from Line 19)	<table><tr><td colspan="5">523257.50</td></tr></table>	523257.50					<table><tr><td colspan="5">3300922.58</td></tr></table>	3300922.58									
523257.50																	
3300922.58																	
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table><tr><td colspan="5">1211919.72</td></tr></table>	1211919.72					<table><tr><td colspan="5">3747783.84</td></tr></table>	3747783.84									
1211919.72																	
3747783.84																	
7. Total Disbursements (from Line 31).....	<table><tr><td colspan="5">323831.63</td></tr></table>	323831.63					<table><tr><td colspan="5">2859695.75</td></tr></table>	2859695.75									
323831.63																	
2859695.75																	
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table><tr><td colspan="5">888088.09</td></tr></table>	888088.09					<table><tr><td colspan="5">888088.09</td></tr></table>	888088.09									
888088.09																	
888088.09																	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
0.00																	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
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. 05/2016)

Page 3

Write or Type Committee Name

ColorOfChange PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
08		01		2018

To:

M M	/	D D	/	Y Y Y Y Y
08		31		2018

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).....

0.00

0.00

(ii) Unitemized

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

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 Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5).....▶

0.00

0.00

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.).....

523257.50

3300922.58

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)).....▶

523257.50

3300922.58

20. Total Federal Receipts

(subtract Line 18(c) from Line 19).....▶

523257.50

3300922.58

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

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	0.00	2.50
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	2.50
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	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 (Including Non-Federal Donations).....	323831.63	2859693.25
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)) ..	323831.63	2859695.75
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	323831.63	2859695.75

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)	0.00	0.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	2.50
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	0.00	2.50

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 169

(check only one)

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

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)

ColorOfChange PAC

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

A. Adams, Katherine, , ,

Mailing Address 1537 W Touhy Ave
2City
ChicagoState
ILZip Code
60626-2623FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Stage Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2018

Transaction ID : VTQZWFYVW12

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

B. Adelman, Laurence, , ,

Mailing Address 243 Bonview St

City

San Francisco

State

CA

Zip Code

94110-5501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

California Newsreel

Occupation (for Individual)

Filmmaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2018

Transaction ID : VTQZWFYXBH2

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

C. Adelman, Laurence, , ,

Mailing Address 243 Bonview St

City

San Francisco

State

CA

Zip Code

94110-5501

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

California Newsreel

Occupation (for Individual)

Filmmaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2018

Transaction ID : VTQZWFYQQ4

Amount of Each Receipt this Period

200.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

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

260.00

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

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

FOR LINE NUMBER: PAGE 7 OF 169

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. American Airlines

Mailing Address 4333 Amon Carter Blvd

City
Fort Worth

State
TX

Zip Code
76155-2664

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 ▼

2061.82

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 06 / 2018

Transaction ID : VTQZWG05HH1

Amount of Each Receipt this Period

131.20

☐ Memo Item

Refund, Non-Contribution Account

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

B. Andersen, Erika, , ,

Mailing Address 93 Timber Line Trail

City
West Park

State
NY

Zip Code
12493

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Proteus International Inc

Occupation (for Individual)
CEO Author

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 01 / 2018

Transaction ID : VTQZWFY4BW3

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

C. Andersen, Erika, , ,

Mailing Address 93 Timber Line Trail

City
West Park

State
NY

Zip Code
12493

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Proteus International Inc

Occupation (for Individual)
CEO Author

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 24 / 2018

Transaction ID : VTQZWFYZ5Z5

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

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

181.20

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)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Avant, Ricki, , ,

Mailing Address 2 Winterview Rd

City
Freeport

State
ME

Zip Code
04032-6210

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Social Worker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

08 / 09 / 2018

Transaction ID : VTQZWFYVX51

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

B. Baker, Charles, , ,

Mailing Address 37 N 4th St

City
Lewisburg

State
PA

Zip Code
17837-1401

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

A company

Occupation (for Individual)

Software Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.00

Date of Receipt

08 / 01 / 2018

Transaction ID : VTQZWFYMA15

Amount of Each Receipt this Period

144.00

☐ Memo Item

Non-Contribution Account

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

C. Barrett, Lisa, , ,

Mailing Address 1350 Sherman Hollow Rd

City
Huntington

State
VT

Zip Code
05462-9416

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5500.00

Date of Receipt

08 / 09 / 2018

Transaction ID : VTQZWFYWSC6

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

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

654.00

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

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

FOR LINE NUMBER: PAGE 9 OF 169

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Barrett, Lisa, , ,

Mailing Address 1350 Sherman Hollow Rd

City
Huntington

State
VT

Zip Code
05462-9416

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/A

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5500.00

Date of Receipt

08 / 17 / 2018

Transaction ID : VTQZWFYTRN1

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Non-Contribution Account

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

B. Belknap, Joanne, , ,

Mailing Address 3075 7th St

City
Boulder

State
CO

Zip Code
80304-2509

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
University of Colorado-Boulder

Occupation (for Individual)
Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 01 / 2018

Transaction ID : VTQZWFYJGZ6

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

C. Benedict, Elizabeth, , ,

Mailing Address 17 Ahab Dr

City
Muir Beach

State
CA

Zip Code
94965-9712

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 ▼

700.00

Date of Receipt

08 / 09 / 2018

Transaction ID : VTQZWFYVV57

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

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

5200.00

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

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

FOR LINE NUMBER: PAGE 10 OF 169

(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Berk, Marjorie, , ,

Mailing Address 7 E 14th St

Apt 1117

City

New York

State

NY

Zip Code

10003-3118

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 ▼

420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	01	/	2018

Transaction ID : VTQZWFYMGJ1

Amount of Each Receipt this Period

120.00

☐ Memo Item

Non-Contribution Account

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

B. Berk, Marjorie, , ,

Mailing Address 7 E 14th St

Apt 1117

City

New York

State

NY

Zip Code

10003-3118

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 ▼

420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	24	/	2018

Transaction ID : VTQZWFYZ349

Amount of Each Receipt this Period

200.00

☐ Memo Item

Non-Contribution Account

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

C. Black, Russell, , ,

Mailing Address 1036 Hiawatha Ct

City

Saginaw

State

TX

Zip Code

76131-4832

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	24	/	2018

Transaction ID : VTQZWFYZ035

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

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

420.00

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

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

FOR LINE NUMBER: PAGE 11 OF 169

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Block, Gay, , ,

Mailing Address 369 Montezuma Ave
310

City
Santa Fe

State
NM

Zip Code
87501-2835

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Artist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 / 09 / 2018

Transaction ID : VTQZWFYWBD2

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

B. Block, Gay, , ,

Mailing Address 369 Montezuma Ave
310

City

Santa Fe

State
NM

Zip Code
87501-2835

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Artist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 / 17 / 2018

Transaction ID : VTQZWFYX4T8

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

C. Block, Gay, , ,

Mailing Address 369 Montezuma Ave
310

City

Santa Fe

State
NM

Zip Code
87501-2835

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Artist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 / 17 / 2018

Transaction ID : VTQZWFYX4V6

Amount of Each Receipt this Period

150.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

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

300.00

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

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

FOR LINE NUMBER: PAGE 12 OF 169

(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Bochinski, Barbara, , ,

Mailing Address 2525 N Killingsworth St
Apt 107City
PortlandState
ORZip Code
97217-4470FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/AOccupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	24	/	2018

Transaction ID : VTQZWFYNNM7

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

B. Bowra, Susanne, , ,

Mailing Address 7712 Hellman Rd

City
ClintonState
WAZip Code
98236-9407FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PfizerOccupation (for Individual)
Field Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	01	/	2018

Transaction ID : VTQZWFYKTE3

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

C. Boylan, Ellen, , ,

Mailing Address 137 Tulip St

City
SummitState
NJZip Code
07901-3412FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/AOccupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	24	/	2018

Transaction ID : VTQZWFYZ841

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

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

560.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 OF 169

(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Braun, Robb, , ,

Mailing Address 26858 China Dr

City
MenifeeState
CAZip Code
92585-9145FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Motivator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2018

Transaction ID : VTQZWFYKYP3

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

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

B. Braun, Robb, , ,

Mailing Address 26858 China Dr

City
MenifeeState
CAZip Code
92585-9145FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Motivator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2018

Transaction ID : VTQZWFYHH2

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

C. Braun, Robb, , ,

Mailing Address 26858 China Dr

City
MenifeeState
CAZip Code
92585-9145FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Motivator

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

277.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2018

Transaction ID : VTQZWFYZ0C6

Amount of Each Receipt this Period

4.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

274.00

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

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

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

FOR LINE NUMBER: PAGE 14 OF 169

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Butler, Ina, , ,

Mailing Address 12013 Branridge Rd

City

Black Jack

State

MO

Zip Code

63033-7306

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 ▼

350.00

Date of Receipt

08 / 01 / 2018

Transaction ID : VTQZWFYJR83

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

B. Butler, Ina, , ,

Mailing Address 12013 Branridge Rd

City

Black Jack

State

MO

Zip Code

63033-7306

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 ▼

350.00

Date of Receipt

08 / 01 / 2018

Transaction ID : VTQZWFYJSF9

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

C. Butler, Ina, , ,

Mailing Address 12013 Branridge Rd

City

Black Jack

State

MO

Zip Code

63033-7306

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 ▼

350.00

Date of Receipt

08 / 09 / 2018

Transaction ID : VTQZWFYVMT0

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

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

300.00

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

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

FOR LINE NUMBER: PAGE 15 OF 169

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Cascade, Catherine, , ,

Mailing Address 23296 Bird Haven Ln

City

Cheshire

State

OR

Zip Code

97419-9724

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 01 / 2018

Transaction ID : VTQZWFYJSE1

Amount of Each Receipt this Period

50.00



Memo Item

Non-Contribution Account

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

B. Cascade, Catherine, , ,

Mailing Address 23296 Bird Haven Ln

City

Cheshire

State

OR

Zip Code

97419-9724

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 01 / 2018

Transaction ID : VTQZWFYKQS3

Amount of Each Receipt this Period

50.00



Memo Item

Non-Contribution Account

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

C. Cascade, Catherine, , ,

Mailing Address 23296 Bird Haven Ln

City

Cheshire

State

OR

Zip Code

97419-9724

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 24 / 2018

Transaction ID : VTQZWFYYPG6

Amount of Each Receipt this Period

100.00



Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

200.00

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

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

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

FOR LINE NUMBER: PAGE 16 OF 169

(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Cazden, Courtney, , ,

Mailing Address 1010 Waltham St

City
LexingtonState
MAZip Code
02421-8044FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/AOccupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2018

Transaction ID : VTQZWFYJYG9

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

B. Cazden, Courtney, , ,

Mailing Address 1010 Waltham St

City
LexingtonState
MAZip Code
02421-8044FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/AOccupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2018

Transaction ID : VTQZWFYZ5K1

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

C. Clarke Torres, Colette, , ,

Mailing Address 7606 Dallas Dr

City
AustinState
TXZip Code
78729-7771FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/AOccupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2018

Transaction ID : VTQZWFYWGV5

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

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

135.00

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

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

FOR LINE NUMBER: PAGE 17 OF 169

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Conant, Alison, , ,

Mailing Address 68 Brookside Ave

City
Newtonville

State
MA

Zip Code
02460-1530

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 ▼

400.00

Date of Receipt

08 / 24 / 2018

Transaction ID : VTQZWFY22D7

Amount of Each Receipt this Period

400.00

☐ Memo Item

Non-Contribution Account

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

B. Conley, Maura, , ,

Mailing Address 6821 Maiden Ln

City
Clarksville

State
MD

Zip Code
21029-1610

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Howard County Community College

Occupation (for Individual)
Yoga Teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

08 / 24 / 2018

Transaction ID : VTQZWFY2882

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

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

C. Conley, Maura, , ,

Mailing Address 6821 Maiden Ln

City
Clarksville

State
MD

Zip Code
21029-1610

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Howard County Community College

Occupation (for Individual)
Yoga Teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

08 / 24 / 2018

Transaction ID : VTQZWFY2890

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

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

1400.00

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 18 OF 169

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Cotton, Betsy, , ,

Mailing Address 65 Evergreen Ln

City
Berkeley

State
CA

Zip Code
94705-1438

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Close the Gap CA

Occupation (for Individual)

Nonprofit Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / **09** / **2018**

Transaction ID : VTQZWFYVN60

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

B. Crabtree, Meg, , ,

Mailing Address 3732 Elm Ave

City
Long Beach

State
CA

Zip Code
90807-3402

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Designory

Occupation (for Individual)

Creative Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

08 / **01** / **2018**

Transaction ID : VTQZWFY47C8

Amount of Each Receipt this Period

35.00

☐ Memo Item

Non-Contribution Account

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

c. Crabtree, Meg, , ,

Mailing Address 3732 Elm Ave

City
Long Beach

State
CA

Zip Code
90807-3402

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Designory

Occupation (for Individual)

Creative Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

08 / **24** / **2018**

Transaction ID : VTQZWFYXSX6

Amount of Each Receipt this Period

35.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

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

320.00

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 19 OF 169

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Curtis, Susan, , ,

Mailing Address 1842 Spaight St

City
Madison

State
WI

Zip Code
53704-5547

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 ▼

450.00

Date of Receipt

08 / 01 / 2018

Transaction ID : VTQZWFYJW72

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

B. Curtis, Susan, , ,

Mailing Address 1842 Spaight St

City
Madison

State
WI

Zip Code
53704-5547

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 ▼

450.00

Date of Receipt

08 / 24 / 2018

Transaction ID : VTQZWFYXXE7

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

C. Daniels, Beth, , ,

Mailing Address 3224 E 51st St

City
Minneapolis

State
MN

Zip Code
55417-1443

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Beth H. Daniels Consulting

Occupation (for Individual)

Educator

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

08 / 09 / 2018

Transaction ID : VTQZWFYWMS6

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

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

100.00

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

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

FOR LINE NUMBER: PAGE 20 OF 169

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Daniels, Beth, , ,

Mailing Address 3224 E 51st St

City
Minneapolis

State
MN

Zip Code
55417-1443

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Beth H. Daniels Consulting

Occupation (for Individual)
Educator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

08 / **09** / **2018**

Transaction ID : VTQZWFYWS76

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

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

B. Daniels, Beth, , ,

Mailing Address 3224 E 51st St

City
Minneapolis

State
MN

Zip Code
55417-1443

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Beth H. Daniels Consulting

Occupation (for Individual)
Educator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

08 / **24** / **2018**

Transaction ID : VTQZWFYXZ93

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

C. Davidoff, Susan, , ,

Mailing Address 24 Bridge St

City
Newton

State
MA

Zip Code
02458-1125

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 ▼

350.00

Date of Receipt

08 / **09** / **2018**

Transaction ID : VTQZWFYW3D7

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

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

280.00

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

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

FOR LINE NUMBER: PAGE 21 OF 169

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Davidoff, Susan, , ,

Mailing Address 24 Bridge St

City
Newton

State
MA

Zip Code
02458-1125

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 ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 24 / 2018

Transaction ID : VTQZWFYYYA7

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

B. Donnelly, Eileen, , ,

Mailing Address 422 Cleveland Ave

City
Santa Cruz

State
CA

Zip Code
95060-3510

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Santa Cruz Health Centers

Occupation (for Individual)
Physician Assistant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 24 / 2018

Transaction ID : VTQZWFYXSJ2

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

C. Dooley-Sammuli, Margaret, , ,

Mailing Address 7965 Glenda Way

City
San Diego

State
CA

Zip Code
92126-2224

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ACLU of San Diego & Imperial Counties

Occupation (for Individual)
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 17 / 2018

Transaction ID : VTQZWFYXEM3

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

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

450.00

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

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

FOR LINE NUMBER: PAGE 22 OF 169

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Dooley-Sammuli, Margaret, , ,

Mailing Address 7965 Glenda Way

City
San Diego

State
CA

Zip Code
92126-2224

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ACLU of San Diego & Imperial Counties

Occupation (for Individual)
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

08 / 24 / 2018

Transaction ID : VTQZWFY2926

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

B. Ehrens, David, , ,

Mailing Address 24 Sunset Ln

City
South Dartmouth

State
MA

Zip Code
02748-3715

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 ▼

425.00

Date of Receipt

08 / 09 / 2018

Transaction ID : VTQZWFYWF66

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

C. Eisner, Avram, , ,

Mailing Address 3026 Beacon Ave S

City
Seattle

State
WA

Zip Code
98144-5815

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FLEXE Inc.

Occupation (for Individual)
Web Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

360.00

Date of Receipt

08 / 01 / 2018

Transaction ID : VTQZWFY4541

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

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

300.00

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

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

FOR LINE NUMBER: PAGE 23 OF 169

(check only one)

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

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)

ColorOfChange PAC

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

A. Eisner, Avram, , ,

Mailing Address 3026 Beacon Ave S

City
SeattleState
WAZip Code
98144-5815FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FLEXE Inc.Occupation (for Individual)
Web Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2018

Transaction ID : VTQZWFY47N9

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

B. Eisner, Avram, , ,

Mailing Address 3026 Beacon Ave S

City
SeattleState
WAZip Code
98144-5815FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FLEXE Inc.Occupation (for Individual)
Web Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2018

Transaction ID : VTQZWFYM5G1

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

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

C. Eisner, Avram, , ,

Mailing Address 3026 Beacon Ave S

City
SeattleState
WAZip Code
98144-5815FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FLEXE Inc.Occupation (for Individual)
Web Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2018

Transaction ID : VTQZWFYZ9X9

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

40.00

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

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

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

FOR LINE NUMBER: PAGE 24 OF 169

(check only one)

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

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)

ColorOfChange PAC

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

A. Eke, Therese, , ,

Mailing Address 47 Point Beach Dr

City
MilfordState
CTZip Code
06460-7642FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/AOccupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2018

Transaction ID : VTQZWFYJPX3

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

B. Eke, Therese, , ,

Mailing Address 47 Point Beach Dr

City
MilfordState
CTZip Code
06460-7642FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/AOccupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2018

Transaction ID : VTQZWFYXCE2

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

C. Eskin, Sandra, , ,

Mailing Address 1047 Woodlawn Ave

City
Iowa CityState
IAZip Code
52245-4447FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/AOccupation (for Individual)
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2018

Transaction ID : VTQZWFYSFC2

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

450.00

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

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

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

FOR LINE NUMBER: PAGE 25 OF 169

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Ewing, William, , ,

Mailing Address 510 E Mount Pleasant Ave

City
Philadelphia

State
PA

Zip Code
19119-1232

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 01 / 2018

Transaction ID : VTQZWFYM131

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

B. Ferguson, Laurie, , ,

Mailing Address 83 Closter Rd

City
Palisades

State
NY

Zip Code
10964-1528

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Psychologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 17 / 2018

Transaction ID : VTQZWFYX4S0

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

C. Finkelstein, Eliza, , ,

Mailing Address 2910 Avalon Ave

City
Berkeley

State
CA

Zip Code
94705-1402

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Education

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 09 / 2018

Transaction ID : VTQZWFYVA52

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

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

600.00

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

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

FOR LINE NUMBER: PAGE 26 OF 169

(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Fuller, Trevor M., , ,

Mailing Address 13423 Whitecastle Ct

City
Charlotte

State
NC

Zip Code
28277-9675

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
The Fuller Law Firm P.C.

Occupation (for Individual)
County Commissioner/Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 08 / 24 / 2018

Transaction ID : VTQZWFY25C7

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Gittins, John, , ,

Mailing Address 5 Bell St

City

North Brookfield

State

MA

Zip Code

01535-1503

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 ▼

218.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 08 / 09 / 2018

Transaction ID : VTQZWFYVY04

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Gittins, John, , ,

Mailing Address 5 Bell St

City

North Brookfield

State

MA

Zip Code

01535-1503

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 ▼

218.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 08 / 09 / 2018

Transaction ID : VTQZWFYWCR2

Amount of Each Receipt this Period

15.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

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

275.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 OF 169

(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Gittins, John, , ,

Mailing Address 5 Bell St

City

North Brookfield

State

MA

Zip Code

01535-1503

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 ▼

218.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2018

Transaction ID : VTQZWFYB39

Amount of Each Receipt this Period

30.00

☐ Memo Item

Non-Contribution Account

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

B. Goodman, Nancy, , ,

Mailing Address 12 Calebs Ln

City

Rockport

State

MA

Zip Code

01966-1704

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Gloucester Public Schools

Occupation (for Individual)

Counselor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

353.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2018

Transaction ID : VTQZWFYKBP2

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

C. Goodman, Nancy, , ,

Mailing Address 12 Calebs Ln

City

Rockport

State

MA

Zip Code

01966-1704

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Gloucester Public Schools

Occupation (for Individual)

Counselor

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

353.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2018

Transaction ID : VTQZWFYX539

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

90.00

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

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

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

FOR LINE NUMBER: PAGE 28 OF 169

(check only one)

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

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)

ColorOfChange PAC

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

A. Gottesman, Sara, , ,

Mailing Address 333 W 88th St

City
New YorkState
NYZip Code
10024-2202FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Consultant

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
08		24		2018

Transaction ID : VTQZWFYZ6W5

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

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

B. Green, Misha, , ,

Mailing Address 1550 N El Centro Ave
Apt 208City
Los AngelesState
CAZip Code
90028-6499FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2018

Transaction ID : VTQZWFYMM06

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

C. Gregg, Gail, , ,

Mailing Address 1 W 64th St
Apt 9ACity
New YorkState
NYZip Code
10023-6745FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Artist/Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2018

Transaction ID : VTQZWFYZAW4

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

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

1000.00

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

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

FOR LINE NUMBER: PAGE 29 OF 169

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Grossman, Kathy, , ,

Mailing Address 140 Ridge Rd

City
Hollis

State
NH

Zip Code
03049-6423

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/A

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / **17** / **2018**

Transaction ID : VTQZWFYX5H0

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

B. Grove, Karen, F, ,

Mailing Address 3826 Alameda De Las Pulgas

City

Menlo Park

State
CA

Zip Code
94025-6210

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 ▼

2500.00

Date of Receipt

08 / **09** / **2018**

Transaction ID : VTQZWFYWSD3

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Non-Contribution Account

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

C. Haas, Colleen, , ,

Mailing Address 69 Crecienta Dr

City

Sausalito

State
CA

Zip Code
94965-1882

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 ▼

2800.00

Date of Receipt

08 / **01** / **2018**

Transaction ID : VTQZWFYKQV5

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

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

2850.00

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

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

FOR LINE NUMBER: PAGE 30 OF 169

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Haas, Colleen, , ,

Mailing Address 69 Crecienta Dr

City
Sausalito

State
CA

Zip Code
94965-1882

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 ▼

2800.00

Date of Receipt

08 / 09 / 2018

Transaction ID : VTQZWFYV9Q1

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

B. Haas, Colleen, , ,

Mailing Address 69 Crecienta Dr

City
Sausalito

State
CA

Zip Code
94965-1882

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 ▼

2800.00

Date of Receipt

08 / 24 / 2018

Transaction ID : VTQZWFYXWW5

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

C. Hahne, Bruce, , ,

Mailing Address 749 Winstead Ter

City
Sunnyvale

State
CA

Zip Code
94087-2303

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Google

Occupation (for Individual)

Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1040.00

Date of Receipt

08 / 01 / 2018

Transaction ID : VTQZWFYM5V8

Amount of Each Receipt this Period

520.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

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

720.00

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

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

FOR LINE NUMBER: PAGE 31 OF 169

(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Hammond, Frederick, , ,

Mailing Address 619 County Route 6

City
GermantownState
NYZip Code
12526-6009FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/AOccupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2018

Transaction ID : VTQZWFYVY95

Amount of Each Receipt this Period

35.00

☐ Memo Item

Non-Contribution Account

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

B. Hancock, Barbara, , ,

Mailing Address 1213 Route 23A

City
CatskillState
NYZip Code
12414-6604FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/AOccupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2018

Transaction ID : VTQZWFYZ8X6

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

C. Handelsman, Linda, , ,

Mailing Address 416 E 1st St

City
BloomingtonState
INZip Code
47401-4722FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
Music Agency Admin

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
08		01		2018

Transaction ID : VTQZWFYMK05

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

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

785.00

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

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

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

FOR LINE NUMBER: PAGE 32 OF 169

(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Harrell, Loytavian, , ,

Mailing Address 6252 Hammock Park Rd

City
West Palm Beach

State
FL

Zip Code
33411-6456

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/A

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 09 / 2018

Transaction ID : VTQZWFYVW16

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

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

B. Heising, Caitlin, , ,

Mailing Address PO Box 2029

City
Los Altos

State
CA

Zip Code
94023-2029

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Heising-Simons Foundation

Occupation (for Individual)
Vice Chair

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 16 / 2018

Transaction ID : VTQZWFYTRJ7

Amount of Each Receipt this Period

20000.00

☐ Memo Item

Non-Contribution Account

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

C. Heising, Mark, , ,

Mailing Address PO Box 2029

City
Los Altos

State
CA

Zip Code
94023-2029

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medley Partners

Occupation (for Individual)
Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 16 / 2018

Transaction ID : VTQZWFYTRG1

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Non-Contribution Account

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

30500.00

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

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

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

FOR LINE NUMBER: PAGE 33 OF 169

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Highland, Sarah, , ,

Mailing Address 89 German Cross Rd

City
Ithaca

State
NY

Zip Code
14850-6027

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
The Carpenter's Boat Shop

Occupation (for Individual)
Instructor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

08 / **01** / **2018**

Transaction ID : VTQZWFY4AB6

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

B. Highland, Sarah, , ,

Mailing Address 89 German Cross Rd

City
Ithaca

State
NY

Zip Code
14850-6027

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
The Carpenter's Boat Shop

Occupation (for Individual)
Instructor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

08 / **09** / **2018**

Transaction ID : VTQZWFYVT05

Amount of Each Receipt this Period

270.00

☐ Memo Item

Non-Contribution Account

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

C. Hirsch, William, , ,

Mailing Address 6341 Wood Dr

City
Oakland

State
CA

Zip Code
94611-3106

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Peer Review Films

Occupation (for Individual)
Producer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

08 / **01** / **2018**

Transaction ID : VTQZWFYK471

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

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

620.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 OF 169

(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Hobart, Helen, , ,

Mailing Address 410 Santa Ynez Way

City
SacramentoState
CAZip Code
95816-3422FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sutter Medical Center SacramentoOccupation (for Individual)
Chaplain

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2018

Transaction ID : VTQZWFYVAJ4

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

B. Hobart, Helen, , ,

Mailing Address 410 Santa Ynez Way

City
SacramentoState
CAZip Code
95816-3422FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sutter Medical Center SacramentoOccupation (for Individual)
Chaplain

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2018

Transaction ID : VTQZWFYVW52

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

C. Jimenez, Mauricio, , ,

Mailing Address 2117 Richmond St NW

City
Grand RapidsState
MIZip Code
49504-2524FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/AOccupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2018

Transaction ID : VTQZWFY4B60

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

325.00

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

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

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

FOR LINE NUMBER: PAGE 35 OF 169

(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Johnson, Crystal, , ,

Mailing Address 6065 Dimm Way

City
Richmond

State
CA

Zip Code
94805-1215

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 ▼

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2018

Transaction ID : VTQZWFYKJB1

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

B. Johnson, Crystal, , ,

Mailing Address 6065 Dimm Way

City
Richmond

State
CA

Zip Code
94805-1215

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 ▼

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2018

Transaction ID : VTQZWFYZ1G1

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

C. Johnson, Robert, , ,

Mailing Address 310 Barton Ave

City
Evanston

State
IL

Zip Code
60202-3302

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2018

Transaction ID : VTQZWFYMEF2

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

200.00

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

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

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

FOR LINE NUMBER: PAGE 36 OF 169

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Klein, Josefa, , ,

Mailing Address 15 Harmony Hill Rd

City
Granby

State
CT

Zip Code
06035-1222

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/A

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

08 / 09 / 2018

Transaction ID : VTQZWFYVT47

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

B. Kwansa, Victor, , ,

Mailing Address 5011 69th Ave

City
Riverdale

State
MD

Zip Code
20737-1781

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
U.S. Department of Education

Occupation (for Individual)
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

08 / 01 / 2018

Transaction ID : VTQZWFY43N2

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

C. Lambert, Ruth, , ,

Mailing Address 100 York St

City
New Haven

State
CT

Zip Code
06511-5620

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 ▼

280.00

Date of Receipt

08 / 01 / 2018

Transaction ID : VTQZWFYKS41

Amount of Each Receipt this Period

40.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

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

240.00

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 37 OF 169

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Lambert, Ruth, , ,

Mailing Address 100 York St

City

New Haven

State

CT

Zip Code

06511-5620

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

280.00

Date of Receipt

08 / 09 / 2018

Transaction ID : VTQZWFYWP20

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

B. Leaf, Erika, , ,

Mailing Address 31086 Fox Hollow Rd

City

Eugene

State

OR

Zip Code

97405-9576

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

08 / 09 / 2018

Transaction ID : VTQZWFYW9F4

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

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

C. Leaf, Erika, , ,

Mailing Address 31086 Fox Hollow Rd

City

Eugene

State

OR

Zip Code

97405-9576

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

08 / 24 / 2018

Transaction ID : VTQZWFYXZD5

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

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

610.00

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

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

FOR LINE NUMBER: PAGE 38 OF 169

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Leigh, Simone, , ,

Mailing Address 104 Montgomery St
2B

City
Brooklyn

State
NY

Zip Code
11225-2008

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Visual Artist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

08 / **09** / **2018**

Transaction ID : VTQZWFYW464

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

B. Leigh, Simone, , ,

Mailing Address 104 Montgomery St
2B

City
Brooklyn

State
NY

Zip Code
11225-2008

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Visual Artist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

08 / **09** / **2018**

Transaction ID : VTQZWFYWGC6

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

C. Levin, Cheryl, , ,

Mailing Address 4827 Shafter Ave

City
Oakland

State
CA

Zip Code
94609-2218

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Designer for Interactive Media

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / **09** / **2018**

Transaction ID : VTQZWFYW4T9

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

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

250.00

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 169

(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Lima, Anthony, , ,

Mailing Address 172-20 133 Ave Apt 7C

City
JamaicaState
NYZip Code
11434FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/AOccupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2018

Transaction ID : VTQZWFY41K0

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

B. Lima, Anthony, , ,

Mailing Address 172-20 133 Ave Apt 7C

City
JamaicaState
NYZip Code
11434FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/AOccupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2018

Transaction ID : VTQZWFYKB84

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

C. Lima, Anthony, , ,

Mailing Address 172-20 133 Ave Apt 7C

City
JamaicaState
NYZip Code
11434FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/AOccupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2018

Transaction ID : VTQZWFYW379

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

75.00

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

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

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

FOR LINE NUMBER: PAGE 40 OF 169

(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Lima, Anthony, , ,

Mailing Address 172-20 133 Ave Apt 7C

City
JamaicaState
NYZip Code
11434FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/AOccupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2018

Transaction ID : VTQZWFYW480

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

B. Lin, Angela, , ,

Mailing Address 1353 Oak St

City

San Francisco

State
CAZip Code
94117-2116FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Square One ProductionsOccupation (for Individual)
Business Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2018

Transaction ID : VTQZWFYJPG1

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

C. Lin, Angela, , ,

Mailing Address 1353 Oak St

City

San Francisco

State
CAZip Code
94117-2116FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Square One ProductionsOccupation (for Individual)
Business Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2018

Transaction ID : VTQZWFYQ040

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

150.00

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

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 41 OF 169

(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Longacre, Michael, , ,

Mailing Address 77 E 12th St
Apt 18CCity
New YorkState
NYZip Code
10003-5009FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/AOccupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2018

Transaction ID : VTQZWFYM2K9

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

B. McBride-Martin, Parris, P, ,

Mailing Address 102 San Salvador Ln

City

Santa Fe

State
NMZip Code
87501-1740FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
George RR MartinOccupation (for Individual)
Personal Assistant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2018

Transaction ID : VTQZWFYXSY4

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

C. McClure, Janet, , ,

Mailing Address 537 Ocean View Ave

City

Encinitas

State
CAZip Code
92024-2629FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
VAOccupation (for Individual)
RN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2018

Transaction ID : VTQZWFYV7S3

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

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

350.00

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

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

FOR LINE NUMBER: PAGE 42 OF 169

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. McFeeley, Sandra, , ,

Mailing Address 390 Tuskarora Trl

City
Mooresville

State
NC

Zip Code
28117-7319

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/A

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

08 / 01 / 2018

Transaction ID : VTQZWFYJMK1

Amount of Each Receipt this Period

40.00

☐ Memo Item

Non-Contribution Account

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

B. McFeeley, Sandra, , ,

Mailing Address 390 Tuskarora Trl

City
Mooresville

State
NC

Zip Code
28117-7319

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/A

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

08 / 24 / 2018

Transaction ID : VTQZWFYXXC1

Amount of Each Receipt this Period

40.00

☐ Memo Item

Non-Contribution Account

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

C. McKay, Jim, , ,

Mailing Address 8 Jackson Pl

City
Brooklyn

State
NY

Zip Code
11215-5506

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-Employed

Occupation (for Individual)
Filmmaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

290.00

Date of Receipt

08 / 01 / 2018

Transaction ID : VTQZWFYK8V6

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

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

105.00

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

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

FOR LINE NUMBER: PAGE 43 OF 169

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. McKinley, Micky, , ,

Mailing Address 114 Ripley Rd

City
Montague

State
MA

Zip Code
01351-9541

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 ▼

750.00

Date of Receipt

08 / 09 / 2018

Transaction ID : VTQZWFYWEG2

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

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

B. McSwigan, John, , ,

Mailing Address 6358 NE Rosebay Dr

City
Hillsboro

State
OR

Zip Code
97124-5044

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/A

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

08 / 01 / 2018

Transaction ID : VTQZWFYK360

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

C. McSwigan, John, , ,

Mailing Address 6358 NE Rosebay Dr

City
Hillsboro

State
OR

Zip Code
97124-5044

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/A

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

08 / 24 / 2018

Transaction ID : VTQZWFYXVY0

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

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

550.00

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

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

FOR LINE NUMBER: PAGE 44 OF 169

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. McSwigan, John, , ,

Mailing Address 6358 NE Rosebay Dr

City
Hillsboro

State
OR

Zip Code
97124-5044

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/A

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

08 / **24** / **2018**

Transaction ID : VTQZWFY24G6

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

B. Mellins, Elizabeth, , ,

Mailing Address 838 Esplanada Way

City
Stanford

State
CA

Zip Code
94305-1015

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Stanford University

Occupation (for Individual)
Scientist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

08 / **01** / **2018**

Transaction ID : VTQZWFYJTF2

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

C. Mellins, Elizabeth, , ,

Mailing Address 838 Esplanada Way

City
Stanford

State
CA

Zip Code
94305-1015

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Stanford University

Occupation (for Individual)
Scientist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

375.00

Date of Receipt

08 / **01** / **2018**

Transaction ID : VTQZWFYK8Z8

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

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

75.00

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 45 OF 169

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Mellins, Elizabeth, , ,

Mailing Address 838 Esplanada Way

City
Stanford

State
CA

Zip Code
94305-1015

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Stanford University

Occupation (for Individual)
Scientist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

08 / **09** / **2018**

Transaction ID : VTQZWFYVEH6

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

B. Mellins, Elizabeth, , ,

Mailing Address 838 Esplanada Way

City
Stanford

State
CA

Zip Code
94305-1015

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Stanford University

Occupation (for Individual)
Scientist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

08 / **24** / **2018**

Transaction ID : VTQZWFYYSN2

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

C. Melloh, James, , ,

Mailing Address 47 Sprague St

City
S Portland

State
ME

Zip Code
04106-3808

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self Employed

Occupation (for Individual)
Acupuncturist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

470.00

Date of Receipt

08 / **09** / **2018**

Transaction ID : VTQZWFYWHW4

Amount of Each Receipt this Period

150.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

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

225.00

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

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

FOR LINE NUMBER: PAGE 46 OF 169

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Meyer, Paulette, , ,

Mailing Address 1714 Stockton St
Ste 400

City
San Francisco

State
CA

Zip Code
94133-2930

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Nonprofit Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / **17** / **2018**

Transaction ID : VTQZWFYX513

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

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

B. Miller, Harry, , ,

Mailing Address 609 S Creekwood Dr

City
Driftwood

State
TX

Zip Code
78619-9714

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 ▼

400.00

Date of Receipt

08 / **09** / **2018**

Transaction ID : VTQZWFYW219

Amount of Each Receipt this Period

400.00

☐ Memo Item

Non-Contribution Account

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

C. Moore, Janet, , ,

Mailing Address 11246 NE 92nd St

City
Kirkland

State
WA

Zip Code
98033-5731

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

08 / **09** / **2018**

Transaction ID : VTQZWFYVRG6

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

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

1150.00

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 47 OF 169

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Moore, Mary Annis, , ,

Mailing Address 518 Thelma Dr

City
San Antonio

State
TX

Zip Code
78212-2458

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

08 / **09** / **2018**

Transaction ID : VTQZWFYV8C3

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

B. Moore, Mary Annis, , ,

Mailing Address 518 Thelma Dr

City
San Antonio

State
TX

Zip Code
78212-2458

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

08 / **09** / **2018**

Transaction ID : VTQZWFYWG69

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

C. Moore, Mary Annis, , ,

Mailing Address 518 Thelma Dr

City
San Antonio

State
TX

Zip Code
78212-2458

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

08 / **24** / **2018**

Transaction ID : VTQZWFYYSG2

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

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

160.00

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

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

FOR LINE NUMBER: PAGE 48 OF 169

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Moore, Mary Annis, , ,

Mailing Address 518 Thelma Dr

City
San Antonio

State
TX

Zip Code
78212-2458

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

08 / **24** / **2018**

Transaction ID : VTQZWFYZAK3

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

B. Muther, Catherine, , ,

Mailing Address 153 Upper Ter

City
San Francisco

State
CA

Zip Code
94117-4513

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 ▼

1300.00

Date of Receipt

08 / **01** / **2018**

Transaction ID : VTQZWFYKYA8

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

C. Newell, Margaret, , ,

Mailing Address 29 Ballard Branch Rd

City
Weaverville

State
NC

Zip Code
28787-9761

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/A

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / **17** / **2018**

Transaction ID : VTQZWFYX4E3

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

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

400.00

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

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

FOR LINE NUMBER: PAGE 49 OF 169

(check only one)

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

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)

ColorOfChange PAC

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

A. Newmann, Joy, , ,

Mailing Address 741 Jenifer St

City
MadisonState
WIZip Code
53703-3530FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/AOccupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	24	/	2018

Transaction ID : VTQZWFY2331

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

B. NEXTGEN CLIMATE ACTION COMMITTEE

Mailing Address 700 13th St NW
Ste 600City
WashingtonState
DCZip Code
20005-5998FEC ID number of contributing
federal political committee.

C C00547349

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

105000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	24	/	2018

Transaction ID : VTQZWFY029

Amount of Each Receipt this Period

105000.00

☐ Memo Item

Non-Contribution Account

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

C. Ortiz, Christine, , ,

Mailing Address 20 W Lucerne Cir
Apt 314City
OrlandoState
FLZip Code
32801-3703FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Equity Design CollaborativeOccupation (for Individual)
Co-Founder

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	01	/	2018

Transaction ID : VTQZWFY4974

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

105150.00

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

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

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

FOR LINE NUMBER: PAGE 50 OF 169

(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Ortiz, Christine, , ,

Mailing Address 20 W Lucerne Cir
Apt 314City
OrlandoState
FLZip Code
32801-3703FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Equity Design CollaborativeOccupation (for Individual)
Co-Founder

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	24	/	2018

Transaction ID : VTQZWFYZ661

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

B. Osburn, Teresa, , ,

Mailing Address 2899 E Walnut St

City
ChathamState
ILZip Code
62629-8631FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/AOccupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	24	/	2018

Transaction ID : VTQZWFYZ8V0

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

C. Oxholm, Kimberly, , ,

Mailing Address 1 Watawga Way W

City
GouldsboroState
PAZip Code
18424-8706FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/AOccupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	01	/	2018

Transaction ID : VTQZWFYK1X8

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

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

700.00

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

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

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

FOR LINE NUMBER: PAGE 51 OF 169

(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Oxholm, Kimberly, , ,

Mailing Address 1 Watawga Way W

City

Gouldsboro

State

PA

Zip Code

18424-8706

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 ▼

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2018

Transaction ID : VTQZWFYYWE3

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

B. Parsley, Adina, , ,

Mailing Address 20420 Marine Dr
Apt P2

City

Stanwood

State

WA

Zip Code

98292-7843

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 ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2018

Transaction ID : VTQZWFYWCG9

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

C. Pritzker, Nicholas, , ,

Mailing Address 1 Letterman Dr
Ste C4-220

City

San Francisco

State

CA

Zip Code

94129-1494

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Entrepreneur

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		15		2018

Transaction ID : VTQZWFYXPB9

Amount of Each Receipt this Period

250000.00

☐ Memo Item

Non-Contribution Account

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

250100.00

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

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 52 OF 169

(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Pruitt, John, , ,

Mailing Address 6433 S 153rd St

City
TukwilaState
WAZip Code
98188-2542FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/AOccupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2018

Transaction ID : VTQZWFYWN69

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

B. Pruitt, John, , ,

Mailing Address 6433 S 153rd St

City
TukwilaState
WAZip Code
98188-2542FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/AOccupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2018

Transaction ID : VTQZWFYWNC6

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

C. Pullman, Aubrey, , ,

Mailing Address 2037 S Washington St

City
SeattleState
WAZip Code
98144-2212FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AmazonOccupation (for Individual)
Artist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2018

Transaction ID : VTQZWFYX589

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

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

250.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 OF 169

(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Raggs, Talicia, , ,

Mailing Address 2283 W 24th St

City
Los AngelesState
CAZip Code
90018-1904FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2018

Transaction ID : VTQZWFYM8W3

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

B. Reed, Kristin, , ,

Mailing Address 681 47th Ave

City
San FranciscoState
CAZip Code
94121-2440FEC 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 ▼

279.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2018

Transaction ID : VTQZWFYYVH6

Amount of Each Receipt this Period

27.00

☐ Memo Item

Non-Contribution Account

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

C. Reeves, Thomas, , ,Mailing Address 101 Stone Point Dr
Unit 177City
AnnapolisState
MDZip Code
21401-7094FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2018

Transaction ID : VTQZWFYJV48

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

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

327.00

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

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

FOR LINE NUMBER: PAGE 54 OF 169

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Reeves, Thomas, , ,

Mailing Address 101 Stone Point Dr
Unit 177

City
Annapolis

State
MD

Zip Code
21401-7094

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/A

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 / 09 / 2018

Transaction ID : VTQZWFYW930

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

B. Reeves, Thomas, , ,

Mailing Address 101 Stone Point Dr
Unit 177

City
Annapolis

State
MD

Zip Code
21401-7094

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/A

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 / 24 / 2018

Transaction ID : VTQZWFYXYB6

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

C. Robinson, Christine, , ,

Mailing Address 9013 Natalie Ave NE

City
Albuquerque

State
NM

Zip Code
87111-3131

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-Employed

Occupation (for Individual)
Minister

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 09 / 2018

Transaction ID : VTQZWFYVBQ5

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

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

325.00

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

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

FOR LINE NUMBER: PAGE 55 OF 169

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Robinson, Mary, , ,

Mailing Address 13915 231st St

City
Laurelton

State
NY

Zip Code
11413-2926

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/A

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / **09** / **2018**

Transaction ID : VTQZWFYPZ71

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

B. Rogers-Fett, Ella, , ,

Mailing Address 505 W University Pkwy

City
Baltimore

State
MD

Zip Code
21210-3281

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N Street Village

Occupation (for Individual)
Advocate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

595.00

Date of Receipt

08 / **01** / **2018**

Transaction ID : VTQZWFYKKT2

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

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

C. Rubin, Todd, , ,

Mailing Address 201 Santa Monica Blvd
Ste 480

City
Santa Monica

State
CA

Zip Code
90401-2266

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-Employed

Occupation (for Individual)
Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

08 / **09** / **2018**

Transaction ID : VTQZWFYV08

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

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

295.00

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

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

FOR LINE NUMBER: PAGE 56 OF 169

(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Rukin, Bonnie, , ,

Mailing Address 48 Evergreen Ln

City
CamdenState
MEZip Code
04843-4414FEC 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 ▼

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2018

Transaction ID : VTQZWFYYZQ0

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

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

B. Ryan, James, , ,

Mailing Address 119 Commonwealth Ave
Apt 5City
BostonState
MAZip Code
02116-2338FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medstro

Occupation (for Individual)

COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2018

Transaction ID : VTQZWFY48G2

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

C. Ryan, James, , ,

Mailing Address 119 Commonwealth Ave
Apt 5City
BostonState
MAZip Code
02116-2338FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medstro

Occupation (for Individual)

COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2018

Transaction ID : VTQZWFYXTQ2

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

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

600.00

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

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

FOR LINE NUMBER: PAGE 57 OF 169

(check only one)

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

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)

ColorOfChange PAC

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

A. Ryan, Josephine, , ,

Mailing Address 5555 N Sheridan Rd
Apt 1106

City
Chicago

State
IL

Zip Code
60640-1639

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 ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 09 / 2018

Transaction ID : VTQZWFYWRG4

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

B. Ryan, Susannah, , ,

Mailing Address 620 E Holmes St

City
Janesville

State
WI

Zip Code
53545-4120

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/A

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 09 / 2018

Transaction ID : VTQZWFYQ1N7

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

C. Schoenbach, Ruth, , ,

Mailing Address 134 Parnassus Ave

City
San Francisco

State
CA

Zip Code
94117-4213

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WestEd

Occupation (for Individual)
Project Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

572.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 09 / 2018

Transaction ID : VTQZWFYPPY2

Amount of Each Receipt this Period

72.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

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

572.00

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

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

FOR LINE NUMBER: PAGE 58 OF 169

(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Schwartz, Miriam, , ,

Mailing Address 333 Great River Rd
Apt 409

City
Somerville

State
MA

Zip Code
02145-1222

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 ▼

2600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 09 / 2018

Transaction ID : VTQZWFYWD39

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

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

B. Segal, Jane, , ,

Mailing Address 315 Eureka St

City

San Francisco

State

CA

Zip Code

94114-2712

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 ▼

2504.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 17 / 2018

Transaction ID : VTQZWFYXB99

Amount of Each Receipt this Period

4.00

☐ Memo Item

Non-Contribution Account

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

C. Segal, Jane, , ,

Mailing Address 315 Eureka St

City

San Francisco

State

CA

Zip Code

94114-2712

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 ▼

2504.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 17 / 2018

Transaction ID : VTQZWFYXBA7

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

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

3004.00

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

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

FOR LINE NUMBER: PAGE 59 OF 169

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Shannon, Margarita, , ,

Mailing Address 119 Mill Ln

City
Amherst

State
MA

Zip Code
01002-2931

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Greenfield Community College

Occupation (for Individual)
Teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / **01** / **2018**

Transaction ID : VTQZWFYKVS0

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

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

B. Shea, Lindsay, , ,

Mailing Address 21 Marlin Hill Rd

City
Germantown

State
NY

Zip Code
12526-5004

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/A

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / **17** / **2018**

Transaction ID : VTQZWFYX5W7

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

C. Shindel, Len, , ,

Mailing Address PO Box 37

City
Mc Henry

State
MD

Zip Code
21541-0037

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

08 / **09** / **2018**

Transaction ID : VTQZWFYVP06

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

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

1050.00

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

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

FOR LINE NUMBER: PAGE 60 OF 169

(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Smith, Brett, , ,

Mailing Address 5300 Irving Ave S

City
MinneapolisState
MNZip Code
55419-1130FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NoneOccupation (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
08		09		2018

Transaction ID : VTQZWFYQ074

Amount of Each Receipt this Period

300.00

☐ Memo Item

Non-Contribution Account

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

B. Smith, Richa, , ,

Mailing Address 543 Prince St SE

City
Grand RapidsState
MIZip Code
49507-1269FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/AOccupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2018

Transaction ID : VTQZWFYZ933

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

C. Smith, Shawn, , ,

Mailing Address 133 E 18th St

City
ChicagoState
ILZip Code
60616-1271FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PFFOccupation (for Individual)
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2018

Transaction ID : VTQZWFYM776

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

575.00

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

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

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

FOR LINE NUMBER: PAGE 61 OF 169

(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Snyder, Cheryl, , ,

Mailing Address 1326 Richardson St

City
BaltimoreState
MDZip Code
21230-5311FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

VNA of MD

Occupation (for Individual)

Social Worker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2018

Transaction ID : VTQZWFYJY60

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

B. Soffer, Jill, , ,

Mailing Address 561 Spring Park Ranch Rd

City
CarbondaleState
COZip Code
81623-9118FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not EmployedOccupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2018

Transaction ID : VTQZWFYV85

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

C. Sprague, Susan, , ,

Mailing Address 104 Blue Jay Dr

City
LakewayState
TXZip Code
78734-5165FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/AOccupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2018

Transaction ID : VTQZWFY4A01

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

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

310.00

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

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

FOR LINE NUMBER: PAGE 62 OF 169

(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Starr, Jane, , ,

Mailing Address 12016 SW Cedarhurst Rd

City
VashonState
WAZip Code
98070-3514FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2018

Transaction ID : VTQZWFYXSN5

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

B. Steele, Mary, , ,

Mailing Address 24561 La Hermosa Ave

City

Laguna Niguel

State

CA

Zip Code

92677-2104

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 ▼

1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2018

Transaction ID : VTQZWFYMJ86

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Non-Contribution Account

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

C. Stone, Jeremy, , ,

Mailing Address 2729 California St

City

San Francisco

State

CA

Zip Code

94115-2513

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

BMVA LLC

Occupation (for Individual)

Art Advisor & Appraiser

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

775.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2018

Transaction ID : VTQZWFYQ1H6

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

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

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

1600.00

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

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

FOR LINE NUMBER: PAGE 63 OF 169

(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Sullivan, Mark, , ,

Mailing Address 2635 Russell St

City
BerkeleyState
CAZip Code
94705-2131FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Psychotherapist

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
08		09		2018

Transaction ID : VTQZWFYWT61

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

B. Sutton, Beth, , ,

Mailing Address 4401 Fairview Rd

City
RenoState
NVZip Code
89511-6524FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Enki Education Inc.Occupation (for Individual)
Educator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2018

Transaction ID : VTQZWFYK3F1

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

C. Sutton, Beth, , ,

Mailing Address 4401 Fairview Rd

City
RenoState
NVZip Code
89511-6524FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Enki Education Inc.Occupation (for Individual)
Educator

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2018

Transaction ID : VTQZWFYXYX8

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

200.00

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)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Tanenbaum, Laurie, , ,

Mailing Address 2943 W Belden Ave

City
Chicago

State
IL

Zip Code
60647-2918

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/A

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 / 01 / 2018

Transaction ID : VTQZWFYK744

Amount of Each Receipt this Period

200.00

☐ Memo Item

Non-Contribution Account

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

B. Tanenbaum, Laurie, , ,

Mailing Address 2943 W Belden Ave

City
Chicago

State
IL

Zip Code
60647-2918

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/A

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 / 09 / 2018

Transaction ID : VTQZWFYWSJ3

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

C. Tareke-Williams, Seble, , ,

Mailing Address 142 Washington Ave

City
Brooklyn

State
NY

Zip Code
11205-2513

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

08 / 01 / 2018

Transaction ID : VTQZWFYKSQ1

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

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

800.00

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 65 OF 169

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Taylor, Leah, , ,

Mailing Address 3720 SW Bond Ave
Unit 1806

City
Portland

State
OR

Zip Code
97239-4576

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Providence

Occupation (for Individual)
Nurse

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

08 / **01** / **2018**

Transaction ID : VTQZWFY45P3

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

B. Taylor, Leah, , ,

Mailing Address 3720 SW Bond Ave
Unit 1806

City
Portland

State
OR

Zip Code
97239-4576

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Providence

Occupation (for Individual)
Nurse

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

08 / **09** / **2018**

Transaction ID : VTQZWFYW1C5

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

C. Taylor, Leah, , ,

Mailing Address 3720 SW Bond Ave
Unit 1806

City
Portland

State
OR

Zip Code
97239-4576

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Providence

Occupation (for Individual)
Nurse

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

08 / **09** / **2018**

Transaction ID : VTQZWFYW1D3

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

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

45.00

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

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

FOR LINE NUMBER: PAGE 66 OF 169

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Taylor, Leah, , ,

Mailing Address 3720 SW Bond Ave
Unit 1806

City
Portland

State
OR

Zip Code
97239-4576

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Providence

Occupation (for Individual)
Nurse

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

08 / **17** / **2018**

Transaction ID : VTQZWFYX9S2

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

B. Taylor, Leah, , ,

Mailing Address 3720 SW Bond Ave
Unit 1806

City
Portland

State
OR

Zip Code
97239-4576

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Providence

Occupation (for Individual)
Nurse

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

08 / **24** / **2018**

Transaction ID : VTQZWFYZ7Q8

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

C. Tennis, Kara, , ,

Mailing Address 6659 Wayne Ave

City
Phila

State
PA

Zip Code
19119-3521

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 ▼

350.00

Date of Receipt

08 / **09** / **2018**

Transaction ID : VTQZWFYWE06

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

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

310.00

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)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Thompson, Megan, , ,

Mailing Address 727 N Capitol Ave
Apt 306

City
Lansing

State
MI

Zip Code
48906-5148

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Michigan State University

Occupation (for Individual)
Data Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 / 09 / 2018

Transaction ID : VTQZWFYWKG4

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

B. Tobey, Eugene, , ,

Mailing Address 278 Forts Ferry Rd

City
Latham

State
NY

Zip Code
12110-1209

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 ▼

420.00

Date of Receipt

08 / 01 / 2018

Transaction ID : VTQZWFYK6H3

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

C. Tobey, Eugene, , ,

Mailing Address 278 Forts Ferry Rd

City
Latham

State
NY

Zip Code
12110-1209

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 ▼

420.00

Date of Receipt

08 / 09 / 2018

Transaction ID : VTQZWFYVAD5

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

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

110.00

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

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

FOR LINE NUMBER: PAGE 68 OF 169

(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Tobey, Eugene, , ,

Mailing Address 278 Forts Ferry Rd

City
LathamState
NYZip Code
12110-1209FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/AOccupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2018

Transaction ID : VTQZWFYXYK9

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

B. Tolmach, Richard, , ,

Mailing Address 1730 13th St

City

Sacramento

State

CA

Zip Code

95811-5854

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
Transportation Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2018

Transaction ID : VTQZWFYYZK9

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

C. Tsien, Wendy, , ,

Mailing Address 85200 Ridgetop Dr

City

Eugene

State

OR

Zip Code

97405-9535

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/AOccupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2018

Transaction ID : VTQZWFYVJH3

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

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

320.00

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

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

FOR LINE NUMBER: PAGE 69 OF 169

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Tsien, Wendy, , ,

Mailing Address 85200 Ridgetop Dr

City
Eugene

State
OR

Zip Code
97405-9535

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 ▼

230.00

Date of Receipt

08 / 24 / 2018

Transaction ID : VTQZWFYYVD4

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

B. Tweedy, Ellie, , ,

Mailing Address 443 12th St
Apt 1D

City
Brooklyn

State
NY

Zip Code
11215-5146

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 ▼

450.00

Date of Receipt

08 / 01 / 2018

Transaction ID : VTQZWFYME61

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

C. Veazey, Liz, , ,

Mailing Address 1145 Park Ave

City
Omaha

State
NE

Zip Code
68105-6970

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self Employed

Occupation (for Individual)
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

08 / 09 / 2018

Transaction ID : VTQZWFYW0P2

Amount of Each Receipt this Period

30.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

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

305.00

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

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

FOR LINE NUMBER: PAGE 70 OF 169

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Vogel, Kenneth, , ,

Mailing Address 1111 Studewood St
Unit 402

City
Houston

State
TX

Zip Code
77008-7180

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FTI Consulting

Occupation (for Individual)
Economist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.00

Date of Receipt

08 / 24 / 2018

Transaction ID : VTQZWFYYTB6

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

B. Webster, Marilyn, , ,

Mailing Address 679 Whately Rd

City
Conway

State
MA

Zip Code
01341-9771

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-Employed

Occupation (for Individual)
Artisan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

08 / 24 / 2018

Transaction ID : VTQZWFYYVG8

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

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

C. Weil, Sandy, , ,

Mailing Address 2083 28th Ave

City
San Francisco

State
CA

Zip Code
94116-1160

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/A

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 / 01 / 2018

Transaction ID : VTQZWFY49N4

Amount of Each Receipt this Period

200.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

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

245.00

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

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

FOR LINE NUMBER: PAGE 71 OF 169

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Weiss, Judith, , ,

Mailing Address 21 Orchard St

City

Cambridge

State

MA

Zip Code

02140-1321

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Samuel Ruben Foundation

Occupation (for Individual)

Foundation President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

08 / **09** / **2018**

Transaction ID : VTQZWFYWQ98

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

B. Weiss, Judith, , ,

Mailing Address 21 Orchard St

City

Cambridge

State

MA

Zip Code

02140-1321

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Samuel Ruben Foundation

Occupation (for Individual)

Foundation President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

08 / **24** / **2018**

Transaction ID : VTQZWFYYP25

Amount of Each Receipt this Period

200.00

☐ Memo Item

Non-Contribution Account

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

C. Welborn, Tes, , ,

Mailing Address 2001 Oak St

City

San Francisco

State

CA

Zip Code

94117-1802

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / **01** / **2018**

Transaction ID : VTQZWFY4260

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

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

475.00

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

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

FOR LINE NUMBER: PAGE 72 OF 169

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Welborn, Tes, , ,

Mailing Address 2001 Oak St

City

San Francisco

State

CA

Zip Code

94117-1802

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 24 / 2018

Transaction ID : VTQZWFY2756

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

B. Wheat, Mary, , ,

Mailing Address 2715 12th St

City

Astoria

State

NY

Zip Code

11102-3741

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 / 09 / 2018

Transaction ID : VTQZWFYQ0H3

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

C. White, Catherine, , ,

Mailing Address 501 W Charles St

City

Champaign

State

IL

Zip Code

61820-6401

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

275.00

Date of Receipt

08 / 09 / 2018

Transaction ID : VTQZWFYWK08

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

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

325.00

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 73 OF 169

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. White, Catherine, , ,

Mailing Address 501 W Charles St

City
Champaign

State
IL

Zip Code
61820-6401

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 ▼

275.00

Date of Receipt

08 / **24** / **2018**

Transaction ID : VTQZWFYVMZ1

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

B. White, Ethan, , ,

Mailing Address 806 NW 22nd St

City
Gainesville

State
FL

Zip Code
32603-1037

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
University of Florida

Occupation (for Individual)
Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 / **09** / **2018**

Transaction ID : VTQZWFYVHH2

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

C. White, Evan, , ,

Mailing Address 1261 Evergreen St

City
San Diego

State
CA

Zip Code
92106-2567

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 ▼

249.00

Date of Receipt

08 / **01** / **2018**

Transaction ID : VTQZWFYJX59

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

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

175.00

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

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

FOR LINE NUMBER: PAGE 74 OF 169

(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. White, Evan, , ,

Mailing Address 1261 Evergreen St

City
San DiegoState
CAZip Code
92106-2567FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/AOccupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	24	/	2018

Transaction ID : VTQZWFYYST1

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

B. Wiley, Anne, , ,

Mailing Address 890 34th Ave
Apt 8City
San FranciscoState
CAZip Code
94121-3448FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Dignity HealthOccupation (for Individual)
Nurse

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	01	/	2018

Transaction ID : VTQZWFYK1J1

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

C. Willis, Standish, , ,

Mailing Address 900 N Ridgeland Ave

City
Oak ParkState
ILZip Code
60302-1441FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Law Office of Standish E. WillisOccupation (for Individual)
Attorney

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
08	/	09	/	2018

Transaction ID : VTQZWFYPZH0

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

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

135.00

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

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

FOR LINE NUMBER: PAGE 75 OF 169

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Wishcamper, Jennifer, , ,

Mailing Address 1467 E 55th Pl

City
Chicago

State
IL

Zip Code
60637-1875

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Costume Designer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

08 / 09 / 2018

Transaction ID : VTQZWFYVFN8

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Non-Contribution Account

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

B. Witty, Joanne, , ,

Mailing Address 77 Columbia Hts

City
Brooklyn

State
NY

Zip Code
11201-1305

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

08 / 01 / 2018

Transaction ID : VTQZWFY43E6

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

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

C. Wofsy, Leon, , ,

Mailing Address 3009 Triumph Dr

City
Alameda

State
CA

Zip Code
94501-1151

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 / 09 / 2018

Transaction ID : VTQZWFYFZR6

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

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

5550.00

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

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

FOR LINE NUMBER: PAGE 76 OF 169

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Zieger, Robert E, , ,

Mailing Address 3304 Denver Ave

A

City
Austin

State
TX

Zip Code
78723-5803

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Santa Cruz Cooperative School

Occupation (for Individual)
Teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 09 / 2018

Transaction ID : VTQZWFYVQB5

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

B. Zwick, Gillian, , ,

Mailing Address 3811 N Figueroa St
Apt 30

City
Los Angeles

State
CA

Zip Code
90065-3162

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-Employed

Occupation (for Individual)
Costume Designer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1004.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 01 / 2018

Transaction ID : VTQZWFYKTP6

Amount of Each Receipt this Period

4.00

☐ Memo Item

Non-Contribution Account

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

C.

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)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

254.00

428236.20

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 77 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. 326 Films

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		08		2018

Mailing Address Bkythwood

City
BlythewoodState
SCZip Code
29016Purpose of Disbursement
Videography Services
☐
Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : VTQ0M9TC3C

Amount of Each Disbursement this Period

427.34

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2018

Mailing Address PO Box 382110

City
CambridgeState
MAZip Code
02238-2110Purpose of Disbursement
Credit Card Processing Fee
☐
Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : VTQ0M9TCCF

Amount of Each Disbursement this Period

208.35

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2018

Mailing Address PO Box 382110

City
CambridgeState
MAZip Code
02238-2110Purpose of Disbursement
Credit Card Processing Fee
☐
Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : VTQ0M9TCT

Amount of Each Disbursement this Period

1605.94

Non-Contribution Account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2241.63

--

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 78 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address PO Box 382110

City
CambridgeState
MAZip Code
02238-2110Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		09		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TCTI

Amount of Each Disbursement this Period

157.16

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address PO Box 382110

City
CambridgeState
MAZip Code
02238-2110Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		09		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TCXF

Amount of Each Disbursement this Period

1946.34

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address PO Box 382110

City
CambridgeState
MAZip Code
02238-2110Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		17		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TCX

Amount of Each Disbursement this Period

433.11

Non-Contribution Account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2536.61

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 79 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address PO Box 382110

City
CambridgeState
MAZip Code
02238-2110Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		24		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TCXI

Amount of Each Disbursement this Period

152.86

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address PO Box 382110

City
CambridgeState
MAZip Code
02238-2110Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		24		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TCY/

Amount of Each Disbursement this Period

743.31

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. AirBNB

Mailing Address 888 Brannan St

City
San FranciscoState
CAZip Code
94103-4928Purpose of Disbursement
Lodging

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		16		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TC4

Amount of Each Disbursement this Period

701.98

Non-Contribution Account

☐ Memo Item

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

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

1598.15

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 80 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. AirBNB

Mailing Address 888 Brannan St

City
San FranciscoState
CAZip Code
94103-4928Purpose of Disbursement
PEX Card - Lodging, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : VTQ0M9TD9I

Amount of Each Disbursement this Period

871.70

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Aloft Orlando

Mailing Address 500 S Orange Ave

City
OrlandoState
FLZip Code
32801-3708Purpose of Disbursement
PEX Card - Lodging, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : VTQ0M9TD9I

Amount of Each Disbursement this Period

672.36

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Aloft Orlando

Mailing Address 500 S Orange Ave

City
OrlandoState
FLZip Code
32801-3708Purpose of Disbursement
PEX Card - Lodging, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : VTQ0M9TD9I

Amount of Each Disbursement this Period

212.84

* Non-Contribution Account

☒ Memo Item

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

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 81 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Amalgamated BankMailing Address 275 7th Ave
FI 8City
New YorkState
NYZip Code
10001-6995Purpose of Disbursement
Bank Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		06		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TC3I

Amount of Each Disbursement this Period

0.25

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Amalgamated BankMailing Address 275 7th Ave
FI 8City
New YorkState
NYZip Code
10001-6995Purpose of Disbursement
Bank Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		24		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TC4C

Amount of Each Disbursement this Period

55.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. American Airlines

Mailing Address 4333 Amon Carter Blvd

City
Fort WorthState
TXZip Code
76155-2664Purpose of Disbursement
Travel

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		03		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TC3I

Amount of Each Disbursement this Period

131.20

Non-Contribution Account

☐ Memo Item

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

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

186.45

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 82 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. American Airlines

Mailing Address 4333 Amon Carter Blvd

City
Fort WorthState
TXZip Code
76155-2664Purpose of Disbursement
Travel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	6			2	0	1	8		

FEC Identification Number

C

Transaction ID : VTQ0M9TC3E

Amount of Each Disbursement this Period

371.80

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. American Airlines

Mailing Address 4333 Amon Carter Blvd

City
Fort WorthState
TXZip Code
76155-2664Purpose of Disbursement
Travel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	6			2	0	1	8		

FEC Identification Number

C

Transaction ID : VTQ0M9TC3E

Amount of Each Disbursement this Period

11.60

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. American Airlines

Mailing Address 4333 Amon Carter Blvd

City
Fort WorthState
TXZip Code
76155-2664Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	7			2	0	1	8		

FEC Identification Number

C

Transaction ID : VTQ0M9TD9I

Amount of Each Disbursement this Period

61.43

* Non-Contribution Account

☒ Memo Item

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

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

383.40

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 83 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. American Airlines

Mailing Address 4333 Amon Carter Blvd

City
Fort WorthState
TXZip Code
76155-2664Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		07		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TD9f

Amount of Each Disbursement this Period

45.07

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. American Airlines

Mailing Address 4333 Amon Carter Blvd

City
Fort WorthState
TXZip Code
76155-2664Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		07		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TD9S

Amount of Each Disbursement this Period

523.61

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. American Airlines

Mailing Address 4333 Amon Carter Blvd

City
Fort WorthState
TXZip Code
76155-2664Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		07		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TD9f

Amount of Each Disbursement this Period

684.60

* Non-Contribution Account

☒ Memo Item

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

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

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 84 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. American Airlines

Mailing Address 4333 Amon Carter Blvd

City
Fort WorthState
TXZip Code
76155-2664Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		07		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TD9

Amount of Each Disbursement this Period

579.50

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. American Airlines

Mailing Address 4333 Amon Carter Blvd

City
Fort WorthState
TXZip Code
76155-2664Purpose of Disbursement
Travel

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		08		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TC3N

Amount of Each Disbursement this Period

211.20

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. American Airlines

Mailing Address 4333 Amon Carter Blvd

City
Fort WorthState
TXZip Code
76155-2664Purpose of Disbursement
Travel

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		08		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TC3I

Amount of Each Disbursement this Period

10.35

Non-Contribution Account

☐ Memo Item

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

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

221.55

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 85 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. American Airlines

Mailing Address 4333 Amon Carter Blvd

City
Fort WorthState
TXZip Code
76155-2664Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		10		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TD9

Amount of Each Disbursement this Period

200.00

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. American Airlines

Mailing Address 4333 Amon Carter Blvd

City
Fort WorthState
TXZip Code
76155-2664Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		14		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TD9X

Amount of Each Disbursement this Period

10.35

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. American Airlines

Mailing Address 4333 Amon Carter Blvd

City
Fort WorthState
TXZip Code
76155-2664Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		24		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TD9

Amount of Each Disbursement this Period

409.20

* Non-Contribution Account

☒ Memo Item

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

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 86 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. American Airlines

Mailing Address 4333 Amon Carter Blvd

City
Fort WorthState
TXZip Code
76155-2664Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		24		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TD92

Amount of Each Disbursement this Period

305.20

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. American Airlines

Mailing Address 4333 Amon Carter Blvd

City
Fort WorthState
TXZip Code
76155-2664Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		24		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDAC

Amount of Each Disbursement this Period

412.40

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. American Airlines

Mailing Address 4333 Amon Carter Blvd

City
Fort WorthState
TXZip Code
76155-2664Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		24		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDA

Amount of Each Disbursement this Period

409.20

* Non-Contribution Account

☒ Memo Item

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

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 87 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. American Airlines

Mailing Address 4333 Amon Carter Blvd

City
Fort WorthState
TXZip Code
76155-2664Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		28		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDA:

Amount of Each Disbursement this Period

142.20

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. American Airlines

Mailing Address 4333 Amon Carter Blvd

City
Fort WorthState
TXZip Code
76155-2664Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		30		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDA:

Amount of Each Disbursement this Period

38.52

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. American Airlines

Mailing Address 4333 Amon Carter Blvd

City
Fort WorthState
TXZip Code
76155-2664Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		30		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDA

Amount of Each Disbursement this Period

613.40

* Non-Contribution Account

☒ Memo Item

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

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 88 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. American Airlines

Mailing Address 4333 Amon Carter Blvd

City
Fort WorthState
TXZip Code
76155-2664Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		30		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDA!

Amount of Each Disbursement this Period

241.40

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. American Airlines

Mailing Address 4333 Amon Carter Blvd

City
Fort WorthState
TXZip Code
76155-2664Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDA!

Amount of Each Disbursement this Period

315.50

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Amuzie, Charles, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		15		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TC9

Amount of Each Disbursement this Period

2488.14

Non-Contribution Account

☐ Memo Item

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

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

2488.14

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 89 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Architects of JusticeMailing Address 401 W Redwood St
Apt 207City
BaltimoreState
MDZip Code
21201-1726Purpose of Disbursement
Design Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	6			2	0	1	8		

FEC Identification Number

C

Transaction ID : VTQ0M9TC3E

Amount of Each Disbursement this Period

6500.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Aries Party Rental

Mailing Address 2822 Gladwood Dr

City
Saint LouisState
MOZip Code
63129-3108Purpose of Disbursement
PEX Card - Event Equipment Rental, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : VTQ0M9TDA7

Amount of Each Disbursement this Period

75.00

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Atlas Party Rental

Mailing Address 7251 NE 2nd Ave

City
MiamiState
FLZip Code
33138-5349Purpose of Disbursement
PEX Card - Event Equipment Rental, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	4			2	0	1	8		

FEC Identification Number

C

Transaction ID : VTQ0M9TDA

Amount of Each Disbursement this Period

568.38

* Non-Contribution Account

☒ Memo Item

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

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

6500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 90 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Barnes, Mary, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		01		2018

Mailing Address 8451 Gate Pkwy W
Apt 242City
JacksonvilleState
FLZip Code
32216-2293Purpose of Disbursement
Returned Payment from 7/31/2018

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : VTQ0M9TDR:

Amount of Each Disbursement this Period

- 800.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Barnes, Mary, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		06		2018

Mailing Address 8451 Gate Pkwy W
Apt 242City
JacksonvilleState
FLZip Code
32216-2293Purpose of Disbursement
Event Staffing Services

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : VTQ0M9TC3J

Amount of Each Disbursement this Period

800.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Barrs Transportation

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		02		2018

Mailing Address 10695 Beach Blvd
Ste 10City
JacksonvilleState
FLZip Code
32246-0821Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : VTQ0M9TC3I

Amount of Each Disbursement this Period

1210.00

Non-Contribution Account

☐ Memo Item

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

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

1210.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 91 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Barrs TransportationMailing Address 10695 Beach Blvd
Ste 10City
JacksonvilleState
FLZip Code
32246-0821Purpose of Disbursement
Travel

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		02		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TC31

Amount of Each Disbursement this Period

1350.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Barrs TransportationMailing Address 10695 Beach Blvd
Ste 10City
JacksonvilleState
FLZip Code
32246-0821Purpose of Disbursement
Travel

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		03		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TC34

Amount of Each Disbursement this Period

440.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Barrs TransportationMailing Address 10695 Beach Blvd
Ste 10City
JacksonvilleState
FLZip Code
32246-0821Purpose of Disbursement
Travel

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		03		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TC31

Amount of Each Disbursement this Period

480.00

Non-Contribution Account

☐ Memo Item

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

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

2270.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 92 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Beans and Cornbread

Mailing Address 29508 Northwestern Hwy

City
SouthfieldState
MIZip Code
48034-5703Purpose of Disbursement
PEX Card - Catering, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		16		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDA/
Amount of Each Disbursement this Period

2400.00

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Bell, Eddie, , ,Mailing Address 3825 Cambridge St
Ste 131City
Las VegasState
NVZip Code
89119-3408Purpose of Disbursement
Returned Payment from 7/16/2018

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		15		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDSc
Amount of Each Disbursement this Period

- 300.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Brown, Scott, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Travel Stipend

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		15		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TC4;
Amount of Each Disbursement this Period

185.00

Non-Contribution Account

☐ Memo Item

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

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

- 115.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 93 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Brown, Scott, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		15		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TC9)

Amount of Each Disbursement this Period

1269.12

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Brown, Siera, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		15		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TC9Y

Amount of Each Disbursement this Period

230.72

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Bryce, Andrew, , ,

Mailing Address 3679 S Riley St

City
Las VegasState
NVZip Code
89147-1048Purpose of Disbursement
Photography Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		21		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TC4I

Amount of Each Disbursement this Period

200.00

Non-Contribution Account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1699.84

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 94 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Cepeida, Mojarro, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : VTQ0M9TCA

Amount of Each Disbursement this Period

5076.72

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Channel One Productions

Mailing Address 444 Meldrum St

City
DetroitState
MIZip Code
48207-4313Purpose of Disbursement
PEX Card - Event Equipment Rental, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	6			2	0	1	8		

FEC Identification Number

C

Transaction ID : VTQ0M9TDAI

Amount of Each Disbursement this Period

950.00

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Chappin, Kwesi, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : VTQ0M9TCA

Amount of Each Disbursement this Period

2396.68

non

☐ Memo Item

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

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

7473.40

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 95 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Chappin, Kwesi, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Travel

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		24		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TC4f

Amount of Each Disbursement this Period

200.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Chappin, Kwesi, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Travel Stipend

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		29		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TC55

Amount of Each Disbursement this Period

275.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Chappin, Kwesi, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Travel Stipend

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		29		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TC5

Amount of Each Disbursement this Period

100.00

Non-Contribution Account

☐ Memo Item

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

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

575.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 96 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. CMS Productions

Mailing Address 264644 Summerdale Dr,

City
SouthfieldState
MIZip Code
48033Purpose of Disbursement
PEX Card - Event Equipment Rental, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : VTQ0M9TDC

Amount of Each Disbursement this Period

411.60

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Collins, Brandi, , ,

Mailing Address 166 Athol Ave.

City
WashingtonState
DCZip Code
20009Purpose of Disbursement
Travel Stipend

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : VTQ0M9TC5C

Amount of Each Disbursement this Period

100.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Collins, Jeffrey, , ,

Mailing Address 166 Athol Ave.

City
WashingtonState
DCZip Code
20009Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : VTQ0M9TCA

Amount of Each Disbursement this Period

458.64

Non-Contribution Account

☐ Memo Item

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

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

558.64

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. ColorOfChange.org

Mailing Address 1076 S Van Ness Ave

City
San FranciscoState
CAZip Code
94110-2616Purpose of Disbursement
Payroll Taxes and Benefits

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		15		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TCCI

Amount of Each Disbursement this Period

4993.58

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Crane, Ryan, , ,

Mailing Address 16 Split Rock Rd

City
TrumbullState
CTZip Code
06611-2650Purpose of Disbursement
Design Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		15		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TC40

Amount of Each Disbursement this Period

600.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Crane, Ryan, , ,

Mailing Address 16 Split Rock Rd

City
TrumbullState
CTZip Code
06611-2650Purpose of Disbursement
Design Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		15		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TC4

Amount of Each Disbursement this Period

325.00

Non-Contribution Account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5918.58

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 98 OF 169

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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Creative Edge Visual Branding LLC

Mailing Address 7527 S Lindbergh Blvd

City
Saint LouisState
MOZip Code
63125-4839Purpose of Disbursement
Graphic Design Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		15		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TC43

Amount of Each Disbursement this Period

269.99

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Criss, Clarice, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		15		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TCA7

Amount of Each Disbursement this Period

2538.80

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Criss, Clarice, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Travel Stipend

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TC51

Amount of Each Disbursement this Period

175.00

Non-Contribution Account

☐ Memo Item

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

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

2983.79

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 99 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. CVS

Mailing Address 420 5th Ave

City
New YorkState
NYZip Code
10018-1079Purpose of Disbursement
PEX Card - Office Supplies, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	9		2	0	1	8

FEC Identification Number

C

Transaction ID : VTQ0M9TDAI

Amount of Each Disbursement this Period

77.80

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Dean, Sadie, , ,Mailing Address 1714 Franklin St
Ste 136City
OaklandState
CAZip Code
94612-3409Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : VTQ0M9TCAI

Amount of Each Disbursement this Period

2026.71

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Delta Airlines

Mailing Address 1030 Delta Blvd

City
AtlantaState
GAZip Code
30354-1989Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : VTQ0M9TDAI

Amount of Each Disbursement this Period

440.00

* Non-Contribution Account

☒ Memo Item

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

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

2026.71

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 100 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Delta Airlines

Mailing Address 1030 Delta Blvd

City
AtlantaState
GAZip Code
30354-1989Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		02		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDAI

Amount of Each Disbursement this Period

223.20

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Delta Airlines

Mailing Address 1030 Delta Blvd

City
AtlantaState
GAZip Code
30354-1989Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		02		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDAI

Amount of Each Disbursement this Period

25.00

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Delta Airlines

Mailing Address 1030 Delta Blvd

City
AtlantaState
GAZip Code
30354-1989Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		03		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDAI

Amount of Each Disbursement this Period

334.20

* Non-Contribution Account

☒ Memo Item

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

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

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 101 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Delta Airlines

Mailing Address 1030 Delta Blvd

City
AtlantaState
GAZip Code
30354-1989Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		07		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDAI

Amount of Each Disbursement this Period

560.40

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Delta Airlines

Mailing Address 1030 Delta Blvd

City
AtlantaState
GAZip Code
30354-1989Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		07		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDAI

Amount of Each Disbursement this Period

928.40

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Delta Airlines

Mailing Address 1030 Delta Blvd

City
AtlantaState
GAZip Code
30354-1989Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		07		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDAI

Amount of Each Disbursement this Period

328.40

* Non-Contribution Account

☒ Memo Item

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

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

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 102 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Delta Airlines

Mailing Address 1030 Delta Blvd

City
AtlantaState
GAZip Code
30354-1989Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		07		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDAI

Amount of Each Disbursement this Period

564.40

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Delta Airlines

Mailing Address 1030 Delta Blvd

City
AtlantaState
GAZip Code
30354-1989Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		07		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDAI

Amount of Each Disbursement this Period

510.40

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Delta Airlines

Mailing Address 1030 Delta Blvd

City
AtlantaState
GAZip Code
30354-1989Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDAI

Amount of Each Disbursement this Period

610.40

* Non-Contribution Account

☒ Memo Item

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

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 103 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Delta Airlines

Mailing Address 1030 Delta Blvd

City
AtlantaState
GAZip Code
30354-1989Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDAI

Amount of Each Disbursement this Period

422.40

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Delta Airlines

Mailing Address 1030 Delta Blvd

City
AtlantaState
GAZip Code
30354-1989Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		13		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDAI

Amount of Each Disbursement this Period

597.40

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Delta Airlines

Mailing Address 1030 Delta Blvd

City
AtlantaState
GAZip Code
30354-1989Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		15		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDAI

Amount of Each Disbursement this Period

530.00

* Non-Contribution Account

☒ Memo Item

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

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 104 OF 169

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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Delta Airlines

Mailing Address 1030 Delta Blvd

City
AtlantaState
GAZip Code
30354-1989Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		16		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDA

Amount of Each Disbursement this Period

236.20

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Delta Airlines

Mailing Address 1030 Delta Blvd

City
AtlantaState
GAZip Code
30354-1989Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		16		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDA

Amount of Each Disbursement this Period

25.00

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Delta Airlines

Mailing Address 1030 Delta Blvd

City
AtlantaState
GAZip Code
30354-1989Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		18		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDA

Amount of Each Disbursement this Period

25.00

* Non-Contribution Account

☒ Memo Item

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

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 105 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Delta Airlines

Mailing Address 1030 Delta Blvd

City
AtlantaState
GAZip Code
30354-1989Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		20		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDA\

Amount of Each Disbursement this Period

25.00

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Delta Airlines

Mailing Address 1030 Delta Blvd

City
AtlantaState
GAZip Code
30354-1989Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		20		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDA\

Amount of Each Disbursement this Period

25.00

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Delta Airlines

Mailing Address 1030 Delta Blvd

City
AtlantaState
GAZip Code
30354-1989Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		24		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDA

Amount of Each Disbursement this Period

- 105.60

* Non-Contribution Account

☒ Memo Item

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

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

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 106 OF 169

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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Delta Airlines

Mailing Address 1030 Delta Blvd

City
AtlantaState
GAZip Code
30354-1989Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		24		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDB1

Amount of Each Disbursement this Period

549.40

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Delta Airlines

Mailing Address 1030 Delta Blvd

City
AtlantaState
GAZip Code
30354-1989Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		25		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDB1

Amount of Each Disbursement this Period

625.60

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Divas and Dishes

Mailing Address 5065 Wolverton Dr

City
Black JackState
MOZip Code
63033-4438Purpose of Disbursement
Catering for Event

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		06		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TC31

Amount of Each Disbursement this Period

2339.70

Non-Contribution Account

☐ Memo Item

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

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

2339.70

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 107 OF 169

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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Edwards, Byron, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		15		2018

Mailing Address 1714 Franklin St
Ste 136City
OaklandState
CAZip Code
94612-3409Purpose of Disbursement
Salary

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9TCB!

Amount of Each Disbursement this Period

1125.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Edwards, Jennifer, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		15		2018

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9TCB4

Amount of Each Disbursement this Period

1903.68

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Egencia

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		29		2018

Mailing Address 3150 139th Ave SE

City
BellevueState
WAZip Code
98005-4046Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9TDB

Amount of Each Disbursement this Period

328.82

* Non-Contribution Account

☒ Memo Item

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

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

3028.68

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 108 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Egencia

Mailing Address 3150 139th Ave SE

City
BellevueState
WAZip Code
98005-4046Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M		D	D		Y	Y	Y	Y	Y	Y
0	8		2	9		2	0	1	8		

FEC Identification Number

C

Transaction ID : VTQ0M9TDB

Amount of Each Disbursement this Period

6.00

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Evans & Katz, LLC

Mailing Address PO Box 75357

City
WashingtonState
DCZip Code
20013-0357Purpose of Disbursement
Compliance Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : VTQ0M9TC3Y

Amount of Each Disbursement this Period

1980.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Facebook

Mailing Address 1 Hacker Way

City
Menlo ParkState
CAZip Code
94025-1456Purpose of Disbursement
PEX Card - Non-Federal Digital Advertising, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M		D	D		Y	Y	Y	Y	Y	Y
0	8		0	1		2	0	1	8		

FEC Identification Number

C

Transaction ID : VTQ0M9TDB

Amount of Each Disbursement this Period

465.49

* Non-Contribution Account

☒ Memo Item

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

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

1980.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 109 OF 169

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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Facebook

Mailing Address 1 Hacker Way

City
Menlo ParkState
CAZip Code
94025-1456Purpose of Disbursement
PEX Card - Non-Federal Digital Advertising, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : VTQ0M9TDB!

Amount of Each Disbursement this Period

34.51

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Facebook

Mailing Address 1 Hacker Way

City
Menlo ParkState
CAZip Code
94025-1456Purpose of Disbursement
PEX Card - Non-Federal Digital Advertising, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : VTQ0M9TDB!

Amount of Each Disbursement this Period

395.68

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Facebook

Mailing Address 1 Hacker Way

City
Menlo ParkState
CAZip Code
94025-1456Purpose of Disbursement
PEX Card - Non-Federal Digital Advertising, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : VTQ0M9TDB

Amount of Each Disbursement this Period

104.32

* Non-Contribution Account

☒ Memo Item

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

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 110 OF 169

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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Facebook

Mailing Address 1 Hacker Way

City
Menlo ParkState
CAZip Code
94025-1456Purpose of Disbursement
PEX Card - Non-Federal Digital Advertising, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : VTQ0M9TDBI

Amount of Each Disbursement this Period

315.74

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Facebook

Mailing Address 1 Hacker Way

City
Menlo ParkState
CAZip Code
94025-1456Purpose of Disbursement
PEX Card - Non-Federal Digital Advertising, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : VTQ0M9TDBI

Amount of Each Disbursement this Period

184.26

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Facebook

Mailing Address 1 Hacker Way

City
Menlo ParkState
CAZip Code
94025-1456Purpose of Disbursement
PEX Card - Non-Federal Digital Advertising, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	4			2	0	1	8		

FEC Identification Number

C

Transaction ID : VTQ0M9TDBI

Amount of Each Disbursement this Period

202.00

* Non-Contribution Account

☒ Memo Item

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

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 111 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Facebook

Mailing Address 1 Hacker Way

City
Menlo ParkState
CAZip Code
94025-1456Purpose of Disbursement
PEX Card - Non-Federal Digital Advertising, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		04		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDBI

Amount of Each Disbursement this Period

298.00

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Facebook

Mailing Address 1 Hacker Way

City
Menlo ParkState
CAZip Code
94025-1456Purpose of Disbursement
PEX Card - Non-Federal Digital Advertising, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		09		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDBI

Amount of Each Disbursement this Period

248.24

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Facebook

Mailing Address 1 Hacker Way

City
Menlo ParkState
CAZip Code
94025-1456Purpose of Disbursement
PEX Card - Non-Federal Digital Advertising, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		09		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDBI

Amount of Each Disbursement this Period

251.76

* Non-Contribution Account

☒ Memo Item

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

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 112 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Facebook

Mailing Address 1 Hacker Way

City
Menlo ParkState
CAZip Code
94025-1456Purpose of Disbursement
PEX Card - Non-Federal Digital Advertising, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		10		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDBI

Amount of Each Disbursement this Period

102.29

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Facebook

Mailing Address 1 Hacker Way

City
Menlo ParkState
CAZip Code
94025-1456Purpose of Disbursement
PEX Card - Non-Federal Digital Advertising, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		10		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDBI

Amount of Each Disbursement this Period

397.71

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Facebook

Mailing Address 1 Hacker Way

City
Menlo ParkState
CAZip Code
94025-1456Purpose of Disbursement
PEX Card - Non-Federal Digital Advertising, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		10		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDBI

Amount of Each Disbursement this Period

375.92

* Non-Contribution Account

☒ Memo Item

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

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 113 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Facebook

Mailing Address 1 Hacker Way

City
Menlo ParkState
CAZip Code
94025-1456Purpose of Disbursement
PEX Card - Non-Federal Digital Advertising, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		10		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDBI

Amount of Each Disbursement this Period

124.08

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Facebook

Mailing Address 1 Hacker Way

City
Menlo ParkState
CAZip Code
94025-1456Purpose of Disbursement
PEX Card - Non-Federal Digital Advertising, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		14		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDB.

Amount of Each Disbursement this Period

84.59

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Facebook

Mailing Address 1 Hacker Way

City
Menlo ParkState
CAZip Code
94025-1456Purpose of Disbursement
PEX Card - Non-Federal Digital Advertising, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		14		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDB

Amount of Each Disbursement this Period

32.93

* Non-Contribution Account

☒ Memo Item

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

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 114 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Facebook

Mailing Address 1 Hacker Way

City
Menlo ParkState
CAZip Code
94025-1456Purpose of Disbursement
PEX Card - Non-Federal Digital Advertising, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	6			2	0	1	8		

FEC Identification Number

C

Transaction ID : VTQ0M9TDBI

Amount of Each Disbursement this Period

391.09

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Facebook

Mailing Address 1 Hacker Way

City
Menlo ParkState
CAZip Code
94025-1456Purpose of Disbursement
PEX Card - Non-Federal Digital Advertising, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	6			2	0	1	8		

FEC Identification Number

C

Transaction ID : VTQ0M9TDBI

Amount of Each Disbursement this Period

108.91

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Facebook

Mailing Address 1 Hacker Way

City
Menlo ParkState
CAZip Code
94025-1456Purpose of Disbursement
PEX Card - Non-Federal Digital Advertising, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	7			2	0	1	8		

FEC Identification Number

C

Transaction ID : VTQ0M9TDBI

Amount of Each Disbursement this Period

500.00

* Non-Contribution Account

☒ Memo Item

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

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

0.00

	21b		22		23		26		27
	28a		28b		28c		x 29		30b

ColorOfChange PAC

 Memo Item

 Memo Item

 Memo Item

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 116 OF 169

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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Fedex Office

Mailing Address 300 Lakeside Dr

City
OaklandState
CAZip Code
94612-3534Purpose of Disbursement
PEX Card - Office Supplies, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		07		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDB

Amount of Each Disbursement this Period

143.84

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Fedex Office

Mailing Address 300 Lakeside Dr

City
OaklandState
CAZip Code
94612-3534Purpose of Disbursement
PEX Card - Office Supplies, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		14		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDB

Amount of Each Disbursement this Period

115.24

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Fedex Office

Mailing Address 300 Lakeside Dr

City
OaklandState
CAZip Code
94612-3534Purpose of Disbursement
PEX Card - Office Supplies, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		14		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDB

Amount of Each Disbursement this Period

204.07

* Non-Contribution Account

☒ Memo Item

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

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 117 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Fedex Office

Mailing Address 300 Lakeside Dr

City
OaklandState
CAZip Code
94612-3534Purpose of Disbursement
PEX Card - Office Supplies, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		14		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDB\

Amount of Each Disbursement this Period

335.79

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Fedex Office

Mailing Address 300 Lakeside Dr

City
OaklandState
CAZip Code
94612-3534Purpose of Disbursement
PEX Card - Office Supplies, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		14		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDB\

Amount of Each Disbursement this Period

201.46

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Fedex Office

Mailing Address 300 Lakeside Dr

City
OaklandState
CAZip Code
94612-3534Purpose of Disbursement
PEX Card - Office Supplies, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		14		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDB\

Amount of Each Disbursement this Period

41.53

* Non-Contribution Account

☒ Memo Item

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

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 118 OF 169

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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Fedex Office

Mailing Address 300 Lakeside Dr

City
OaklandState
CAZip Code
94612-3534Purpose of Disbursement
PEX Card - Office Supplies, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		16		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDC1

Amount of Each Disbursement this Period

93.74

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Fedex Office

Mailing Address 300 Lakeside Dr

City
OaklandState
CAZip Code
94612-3534Purpose of Disbursement
PEX Card - Office Supplies, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		17		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDC1

Amount of Each Disbursement this Period

1299.03

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Fedex Office

Mailing Address 300 Lakeside Dr

City
OaklandState
CAZip Code
94612-3534Purpose of Disbursement
PEX Card - Office Supplies, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		21		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDC

Amount of Each Disbursement this Period

531.30

* Non-Contribution Account

☒ Memo Item

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

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 119 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Fedex Office

Mailing Address 300 Lakeside Dr

City
OaklandState
CAZip Code
94612-3534Purpose of Disbursement
PEX Card - Office Supplies, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : VTQ0M9TDC:

Amount of Each Disbursement this Period

385.41

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Feeney, Evan, , ,

Mailing Address 550 Shorth Hills Cir

City
MillburnState
NJZip Code
07041Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : VTQ0M9TCB7

Amount of Each Disbursement this Period

3468.96

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Freeman InsuranceMailing Address 1035 San Pablo Ave
Ste 1City
AlbanyState
CAZip Code
94706-2276Purpose of Disbursement
PEX Card - Insurance, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	6		2	0	1	8

FEC Identification Number

C

Transaction ID : VTQ0M9TDC

Amount of Each Disbursement this Period

303.61

* Non-Contribution Account

☒ Memo Item

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

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

3	4	6	8	.	9	6
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 120 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Freeman InsuranceMailing Address 1035 San Pablo Ave
Ste 1City
AlbanyState
CAZip Code
94706-2276Purpose of Disbursement
Insurance

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : VTQ0M9TC4

Amount of Each Disbursement this Period

1304.94

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. G and CC Rentals

Mailing Address 18 Morton St

City
New YorkState
NYZip Code
10014-4004Purpose of Disbursement
PEX Card - Event Equipment Rental, See Payment from 7/26/18

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	9			2	0	1	8		

FEC Identification Number

C

Transaction ID : VTQ0M9TDC8

Amount of Each Disbursement this Period

250.00

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Gates, James, , ,Mailing Address 1-South
Louville Ave.City
Saint LouisState
MOZip Code
63139Purpose of Disbursement
PEX Card - Event Entertainment Services, See Payment from 7/26/18

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	7			2	0	1	8		

FEC Identification Number

C

Transaction ID : VTQ0M9TD9

Amount of Each Disbursement this Period

450.00

* Non-Contribution Account

☒ Memo Item

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

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

1304.94

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 121 OF 169

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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Goodman, Keith, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		06		2018

Mailing Address 1714 Franklin St
100-136City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Strategic Consulting Services

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9TC3f

Amount of Each Disbursement this Period

11486.40

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Grishaber, Alexsys, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		15		2018

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9TCBf

Amount of Each Disbursement this Period

2623.28

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Hampton Inn

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		28		2018

Mailing Address 755 Crossover Ln

City
MemphisState
TNZip Code
38117-4906Purpose of Disbursement
Lodging

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9TC4f

Amount of Each Disbursement this Period

18018.64

Non-Contribution Account

☐ Memo Item

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

32128.32

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 122 OF 169

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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Hatch, Arisha, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		15		2018

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9TCB/
Amount of Each Disbursement this Period

2272.86

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Hatch, Arisha, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		29		2018

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Travel Stipend

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9TC50
Amount of Each Disbursement this Period

100.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Hawk, Ariana, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		15		2018

Mailing Address 1714 Franklin St
100-136City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9TCB
Amount of Each Disbursement this Period

2453.44

Non-Contribution Account

☐ Memo Item

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

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

4826.30

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 123 OF 169

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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Haymon, Marcus, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		15		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TCB

Amount of Each Disbursement this Period

184.62

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Hinton, Danita, , ,Mailing Address 1714 Franklin St
Ste 136City
OaklandState
CAZip Code
94612-3409Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		15		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TCB

Amount of Each Disbursement this Period

822.13

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Holiday Inn Express

Mailing Address 4680 Lindell Blvd

City
Saint LouisState
MOZip Code
63108-3726Purpose of Disbursement
PEX Card - Lodging, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		07		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDC

Amount of Each Disbursement this Period

429.90

* Non-Contribution Account

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1006.75

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 124 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Hotel St. Regis Operating LLC

Mailing Address 3071 W Grand Blvd

City
DetroitState
MIZip Code
48202-3004Purpose of Disbursement
Room Rental and Catering for Event

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		08		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TC3F

Amount of Each Disbursement this Period

25134.52

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Hotel St. Regis Operating LLC

Mailing Address 3071 W Grand Blvd

City
DetroitState
MIZip Code
48202-3004Purpose of Disbursement
Room Rental and Catering for Event

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		21		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TC4E

Amount of Each Disbursement this Period

1.25

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Hotel St. Regis Operating LLC

Mailing Address 3071 W Grand Blvd

City
DetroitState
MIZip Code
48202-3004Purpose of Disbursement
Room Rental and Catering for Event

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		27		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TC4I

Amount of Each Disbursement this Period

748.02

Non-Contribution Account

☐ Memo Item

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

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

25883.79

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 125 OF 169

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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. IB5K LLCMailing Address 319 Lafayette St
Unit 195City
New YorkState
NYZip Code
10012-2711Purpose of Disbursement
Web and Mobile Developing

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		20		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TC4C

Amount of Each Disbursement this Period

7500.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. IB5K LLCMailing Address 319 Lafayette St
Unit 195City
New YorkState
NYZip Code
10012-2711Purpose of Disbursement
Web and Mobile Developing

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TC5E

Amount of Each Disbursement this Period

3750.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Illogik Studio

Mailing Address 1720 Woodridge Ln

City
FlorissantState
MOZip Code
63033-1941Purpose of Disbursement
PEX Card - Event Entertainment Services, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		24		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDD

Amount of Each Disbursement this Period

750.00

* Non-Contribution Account

☒ Memo Item

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

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

11250.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 126 OF 169

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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Inland Press

Mailing Address 2001 W Lafayette Blvd

City
DetroitState
MIZip Code
48216-1852Purpose of Disbursement
PEX Card - Non-Federal Digital Advertising, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : VTQ0M9TDC!

Amount of Each Disbursement this Period

1749.00

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Irving, Allen, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : VTQ0M9TC9T

Amount of Each Disbursement this Period

1114.54

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Jackson, Contessa, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : VTQ0M9TCB

Amount of Each Disbursement this Period

2115.52

Non-Contribution Account

☐ Memo Item

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

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

3230.06

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 127 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. JetBlue

Mailing Address 11829 Queens Blvd

City
Forest HillsState
NYZip Code
11375-7212Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDC/
Amount of Each Disbursement this Period

264.20

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Jones, Todd, , ,Mailing Address 1714 Franklin St
Ste 136City
OaklandState
CAZip Code
94612-3409Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		15		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TCB/
Amount of Each Disbursement this Period

725.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Lathia, Bhavik, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		15		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TCB/
Amount of Each Disbursement this Period

2163.15

Non-Contribution Account

☐ Memo Item

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

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

2888.15

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 128 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Lathia, Bhavik, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Travel

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		22		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TC4

Amount of Each Disbursement this Period

2642.40

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Leonard, Ashley, , ,

Mailing Address 4103 Saint Clair Pl

City
Temple HillsState
MDZip Code
20748-1629Purpose of Disbursement
Event Staffing Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		28		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TC4S

Amount of Each Disbursement this Period

725.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Leonard, Ashley, , ,

Mailing Address 4103 Saint Clair Pl

City
Temple HillsState
MDZip Code
20748-1629Purpose of Disbursement
Event Staffing Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		28		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TC4'

Amount of Each Disbursement this Period

425.00

Non-Contribution Account

☐ Memo Item

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

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

3792.40

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 129 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Leonard, Ashley, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2018

Mailing Address 4103 Saint Clair Pl

City
Temple HillsState
MDZip Code
20748-1629Purpose of Disbursement
Event Staffing Services

Candidate Name

Category/
TypeOffice 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:

FEC Identification Number

C

Transaction ID : VTQ0M9TC5E

Amount of Each Disbursement this Period

450.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Lewis, Sonya, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		15		2018

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Category/
TypeOffice 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:

FEC Identification Number

C

Transaction ID : VTQ0M9TCB1

Amount of Each Disbursement this Period

100.52

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Lowe, Chasidy, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		15		2018

Mailing Address 1714 Franklin St
Ste 136City
OaklandState
CAZip Code
94612-3409Purpose of Disbursement
Salary

Candidate Name

Category/
TypeOffice 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:

FEC Identification Number

C

Transaction ID : VTQ0M9TCB

Amount of Each Disbursement this Period

251.18

Non-Contribution Account

☐ Memo Item

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

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

801.70

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 130 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		01		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDCI

Amount of Each Disbursement this Period

94.09

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		01		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDCI

Amount of Each Disbursement this Period

14.03

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		01		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDCI

Amount of Each Disbursement this Period

17.25

* Non-Contribution Account

☒ Memo Item

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

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 131 OF 169

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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		01		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDCI

Amount of Each Disbursement this Period

98.44

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		02		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDCI

Amount of Each Disbursement this Period

59.56

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		19		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDCI

Amount of Each Disbursement this Period

23.90

* Non-Contribution Account

☒ Memo Item

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

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 132 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		19		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDC

Amount of Each Disbursement this Period

92.20

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		21		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDC

Amount of Each Disbursement this Period

27.80

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		22		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDC

Amount of Each Disbursement this Period

147.99

* Non-Contribution Account

☒ Memo Item

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

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 133 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		23		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDCI

Amount of Each Disbursement this Period

11.00

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDCI

Amount of Each Disbursement this Period

16.91

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDCI

Amount of Each Disbursement this Period

18.24

* Non-Contribution Account

☒ Memo Item

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

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 134 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Lyles, Taylor, , ,

Mailing Address 1085 Eastwood Branch Dr

City
JacksonvilleState
FLZip Code
32259-1805Purpose of Disbursement
Returned Payment from 7/31/2018

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : VTQ0M9TDS'

Amount of Each Disbursement this Period

- 350.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Lyles, Taylor, , ,

Mailing Address 1085 Eastwood Branch Dr

City
JacksonvilleState
FLZip Code
32259-1805Purpose of Disbursement
Event Staffing Services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	6			2	0	1	8		

FEC Identification Number

C

Transaction ID : VTQ0M9TC3M

Amount of Each Disbursement this Period

350.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Magnus, Jade, , ,

Mailing Address 3900 Adeline St
Unit 312City
OaklandState
CAZip Code
94608-3975Purpose of Disbursement
Salary

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : VTQ0M9TCB

Amount of Each Disbursement this Period

812.00

Non-Contribution Account

☐ Memo Item

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

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

812.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 135 OF 169

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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Magnus, Jade, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		29		2018

Mailing Address 3900 Adeline St
Unit 312City
OaklandState
CAZip Code
94608-3975Purpose of Disbursement
Travel Stipend

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9TC54

Amount of Each Disbursement this Period

100.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Malone, Kortni, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		15		2018

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9TCBF

Amount of Each Disbursement this Period

2538.80

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Malone, Quiana, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		15		2018

Mailing Address 1714 Franklin St
100-136City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Travel Stipend

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9TC3:

Amount of Each Disbursement this Period

300.00

Non-Contribution Account

☐ Memo Item

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

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

2938.80

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 136 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Malone, Quiana, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		15		2018

Mailing Address 1714 Franklin St
100-136City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9TCB!

Amount of Each Disbursement this Period

1846.40

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Marie, Christy, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		06		2018

Mailing Address 2920 N 18th St

City
TampaState
FLZip Code
33605-2637Purpose of Disbursement
Photography Services

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9TC3F

Amount of Each Disbursement this Period

750.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Marks, Daniel, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		15		2018

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9TCB

Amount of Each Disbursement this Period

581.68

Non-Contribution Account

☐ Memo Item

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

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

3178.08

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 137 OF 169

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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Marriott St. Louis Grand

Mailing Address 800 Washington Ave

City
Saint LouisState
MOZip Code
63101-1202Purpose of Disbursement
PEX Card - Lodging, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
08		06		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDCI

Amount of Each Disbursement this Period

256.30

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. McKelvey, Daniel, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Category/
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
08		15		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TCB\

Amount of Each Disbursement this Period

2076.60

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. McKelvey, Daniel, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Travel Stipend

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
08		29		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TC5:

Amount of Each Disbursement this Period

100.00

Non-Contribution Account

☐ Memo Item

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

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

2176.60

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 138 OF 169

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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. McKinney, Patricia, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : VTQ0M9TCB1

Amount of Each Disbursement this Period

2537.92

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. McKinney, Patrina, , ,Mailing Address 1714 Franklin St
100-136City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Travel Stipend

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	9			2	0	1	8		

FEC Identification Number

C

Transaction ID : VTQ0M9TC59

Amount of Each Disbursement this Period

100.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mena Darre LLC

Mailing Address 4346 Gibson Ave

City
Saint LouisState
MOZip Code
63110-1612Purpose of Disbursement
PEX Card - Photography Services, See Payment from 7/26/18

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : VTQ0M9TDC

Amount of Each Disbursement this Period

675.00

* Non-Contribution Account

☒ Memo Item

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

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

2637.92

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 139 OF 169

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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Middle Seat

Mailing Address PO Box 21600

City
WashingtonState
DCZip Code
20009-9600Purpose of Disbursement
Non-Federal Digital Advertising

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		15		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TC32

Amount of Each Disbursement this Period

1350.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Morris, Ashton, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		15		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TCB)

Amount of Each Disbursement this Period

2537.92

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRP Photography

Mailing Address 11223 Magnolia Blvd

City
North HollywoodState
CAZip Code
91601-3703Purpose of Disbursement
PEX Card - Photography Services, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		15		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDC

Amount of Each Disbursement this Period

617.40

* Non-Contribution Account

☒ Memo Item

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

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

3887.92

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 140 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. NGP VAN

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
08		02		2018

Mailing Address 1101 15th St NW

City
WashingtonState
DCZip Code
20005-5006Purpose of Disbursement
Software and Support Services

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9TC22

Amount of Each Disbursement this Period

625.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Norwood, La'Nae, , ,

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
08		15		2018

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9TCB2

Amount of Each Disbursement this Period

230.72

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Norwood, La'Nae, , ,

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
08		27		2018

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Travel Stipend

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9TD01

Amount of Each Disbursement this Period

100.00

Non-Contribution Account

☐ Memo Item

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

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

955.72

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 141 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Parcel Express

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		06		2018

Mailing Address 3351 Corridor Marketplace
Ste 400City
LaurelState
MDZip Code
20724-2383Purpose of Disbursement
Shipping

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9TC3/

Amount of Each Disbursement this Period

60.87

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Petty, Corina, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		15		2018

Mailing Address 150 Preakness Ln

City
VallejoState
CAZip Code
94591-8517Purpose of Disbursement
Salary

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9TCCC

Amount of Each Disbursement this Period

1307.24

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Petty, Corina, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		29		2018

Mailing Address 150 Preakness Ln

City
VallejoState
CAZip Code
94591-8517Purpose of Disbursement
Travel Stipend

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9TC5:

Amount of Each Disbursement this Period

100.00

Non-Contribution Account

☐ Memo Item

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

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

1468.11

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 142 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Powers, Alicia, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : VTQ0M9TCC

Amount of Each Disbursement this Period

4615.20

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Powers, Alicia, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Travel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	9			2	0	1	8		

FEC Identification Number

C

Transaction ID : VTQ0M9TC4X

Amount of Each Disbursement this Period

1310.05

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Powers, Alicia, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Travel Stipend

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	9			2	0	1	8		

FEC Identification Number

C

Transaction ID : VTQ0M9TC4

Amount of Each Disbursement this Period

100.00

Non-Contribution Account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6025.25

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 143 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Private Eyes, Inc.Mailing Address 740 Greenville Blvd SE
400-105City
GreenvilleState
NCZip Code
27858-5135Purpose of Disbursement
Security Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TC5J

Amount of Each Disbursement this Period

560.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Private Eyes, Inc.Mailing Address 740 Greenville Blvd SE
400-105City
GreenvilleState
NCZip Code
27858-5135Purpose of Disbursement
Security Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TC5K

Amount of Each Disbursement this Period

560.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Quality Printers

Mailing Address 301 Kennedy St NW

City
WashingtonState
DCZip Code
20011-6511Purpose of Disbursement
PEX Card - Office Supplies, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		21		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDC

Amount of Each Disbursement this Period

697.95

* Non-Contribution Account

☒ Memo Item

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

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

1120.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 144 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. QuickBooks

Mailing Address 150 Cambridgepark Dr

City
CambridgeState
MAZip Code
02140-2370Purpose of Disbursement
Software

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		20		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TC4/

Amount of Each Disbursement this Period

650.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. QuickBooks

Mailing Address 150 Cambridgepark Dr

City
CambridgeState
MAZip Code
02140-2370Purpose of Disbursement
Software

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		23		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TC4/

Amount of Each Disbursement this Period

22.58

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. R&R Contracting

Mailing Address 818 Lone Star Dr

City
O FallonState
MOZip Code
63366-1950Purpose of Disbursement
PEX Card - Waste Management Services, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		03		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDC

Amount of Each Disbursement this Period

405.00

* Non-Contribution Account

☒ Memo Item

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

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

672.58

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 145 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Resonance Campaigns

Mailing Address 1020 16th St NW

City
WashingtonState
DCZip Code
20036-5713Purpose of Disbursement
Non-Federal Production and Design Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		06		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TC3E

Amount of Each Disbursement this Period

78539.22

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Ross, Reagan, , ,Mailing Address 1714 Franklin St
Ste 100-136City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		15		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TCC2

Amount of Each Disbursement this Period

1163.36

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Run & Shoot Film Work

Mailing Address PO Box 462498

City
AuroraState
COZip Code
80046-2498Purpose of Disbursement
Non-Federal Media Production Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		17		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TC4

Amount of Each Disbursement this Period

7500.00

Non-Contribution Account

☐ Memo Item

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

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

87202.58

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 146 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Ruth, Jeannoel, , ,

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
08		15		2018

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9TCB.

Amount of Each Disbursement this Period

2537.92

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Sanders, Dominique, , ,

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
08		15		2018

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9TCC.

Amount of Each Disbursement this Period

2792.24

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Savadogo, Ismael, , ,

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
08		15		2018

Mailing Address 1714 Franklin St
Ste 100-136City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9TCC

Amount of Each Disbursement this Period

2322.04

Non-Contribution Account

☐ Memo Item

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

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

7652.20

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 147 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Scott, Charles, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		15		2018

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : VTQ0M9TCCI

Amount of Each Disbursement this Period

480.72

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Shabazz, Rashid, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		15		2018

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : VTQ0M9TCCI

Amount of Each Disbursement this Period

288.44

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Sheraton Hotel

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		08		2018

Mailing Address 10605 Deerwood Park Blvd

City
JacksonvilleState
FLZip Code
32256-0509Purpose of Disbursement
PEX Card - Event Space Rental, See Payment from 7/26/18

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : VTQ0M9TDC

Amount of Each Disbursement this Period

2017.05

* Non-Contribution Account

☒ Memo Item

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

769.16

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 PageFOR LINE NUMBER:
(check only one)

PAGE 148 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Shurland, Gillian, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		15		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TCCI

Amount of Each Disbursement this Period

75.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Sirius Consulting

Mailing Address 5959 Topanga Canyon Blvd

City
Woodland HillsState
CAZip Code
91367-3630Purpose of Disbursement
PEX Card - Software Services, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		20		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDDC

Amount of Each Disbursement this Period

500.00

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Smuvi DJ Services

Mailing Address 1921 Copeman Blvd

City
FlintState
MIZip Code
48504-3005Purpose of Disbursement
PEX Card - Event Entertainment Services, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		05		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDD

Amount of Each Disbursement this Period

291.25

* Non-Contribution Account

☒ Memo Item

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

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

75.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 149 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Southwest Airlines

Mailing Address 2702 Love Field Dr

City
DallasState
TXZip Code
75235-1908Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		05		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDD:

Amount of Each Disbursement this Period

363.98

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Southwest Airlines

Mailing Address 2702 Love Field Dr

City
DallasState
TXZip Code
75235-1908Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		22		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDD:

Amount of Each Disbursement this Period

617.96

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Southwest Airlines

Mailing Address 2702 Love Field Dr

City
DallasState
TXZip Code
75235-1908Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		22		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDD:

Amount of Each Disbursement this Period

495.96

* Non-Contribution Account

☒ Memo Item

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

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 150 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Southwest Airlines

Mailing Address 2702 Love Field Dr

City
DallasState
TXZip Code
75235-1908Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		24		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDD!

Amount of Each Disbursement this Period

162.98

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Southwest Airlines

Mailing Address 2702 Love Field Dr

City
DallasState
TXZip Code
75235-1908Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		24		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDD!

Amount of Each Disbursement this Period

525.78

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Southwest Airlines

Mailing Address 2702 Love Field Dr

City
DallasState
TXZip Code
75235-1908Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		24		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDD!

Amount of Each Disbursement this Period

428.96

* Non-Contribution Account

☒ Memo Item

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

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 151 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Southwest Airlines

Mailing Address 2702 Love Field Dr

City
DallasState
TXZip Code
75235-1908Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		28		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDDI

Amount of Each Disbursement this Period

343.96

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Southwest Airlines

Mailing Address 2702 Love Field Dr

City
DallasState
TXZip Code
75235-1908Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		30		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDDI

Amount of Each Disbursement this Period

226.97

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Southwest Airlines

Mailing Address 2702 Love Field Dr

City
DallasState
TXZip Code
75235-1908Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		30		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDDI

Amount of Each Disbursement this Period

308.98

* Non-Contribution Account

☒ Memo Item

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

0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 152 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Southwest Airlines

Mailing Address 2702 Love Field Dr

City
DallasState
TXZip Code
75235-1908Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDDI

Amount of Each Disbursement this Period

591.10

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Southwest Airlines

Mailing Address 2702 Love Field Dr

City
DallasState
TXZip Code
75235-1908Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDDI

Amount of Each Disbursement this Period

488.96

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. SP Plus CorpMailing Address 200 E Randolph St
Ste 7700City
ChicagoState
ILZip Code
60601-7702Purpose of Disbursement
Rental and Catering for Event

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TC5I

Amount of Each Disbursement this Period

600.00

Non-Contribution Account

☐ Memo Item

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

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

600.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 153 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Spencer, Orlando, , ,

Mailing Address 10957 River Falls Dr

City
JacksonvilleState
FLZip Code
32219-5138Purpose of Disbursement
Rent

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		22		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TC4f

Amount of Each Disbursement this Period

2400.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Spirit Airlines

Mailing Address 2800 Executive Way

City
MiramarState
FLZip Code
33025-6542Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		02		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDDI

Amount of Each Disbursement this Period

136.19

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Staples

Mailing Address 217 Broadway

City
New YorkState
NYZip Code
10007-2909Purpose of Disbursement
PEX Card - Office Supplies, See Payment from 7/26/18

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDD

Amount of Each Disbursement this Period

25.74

* Non-Contribution Account

☒ Memo Item

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

2400.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 154 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Staton, Chad, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2018

Mailing Address 1714 Franklin St
100-136City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Travel Stipend

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9TC51

Amount of Each Disbursement this Period

100.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Sugar City Treats

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2018

Mailing Address 870 NE 143rd St

City
North MiamiState
FLZip Code
33161-2330Purpose of Disbursement
PEX Card - Flower Wall Rental, See Payment from 7/26/18

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9TDDI

Amount of Each Disbursement this Period

615.25

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Talbert, Shannon, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		15		2018

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9TCC

Amount of Each Disbursement this Period

3292.80

Non-Contribution Account

☐ Memo Item

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

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

3392.80

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 155 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Talbert, Shannon, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Travel Stipend

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TC5K

Amount of Each Disbursement this Period

100.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Target

Mailing Address 2700 5th St

City
AlamedaState
CAZip Code
94501-6574Purpose of Disbursement
PEX Card - Office Supplies, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDDI

Amount of Each Disbursement this Period

154.20

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Target

Mailing Address 2700 5th St

City
AlamedaState
CAZip Code
94501-6574Purpose of Disbursement
PEX Card - Office Supplies, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDD

Amount of Each Disbursement this Period

44.81

* Non-Contribution Account

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

100.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 156 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Target

Mailing Address 2700 5th St

City
AlamedaState
CAZip Code
94501-6574Purpose of Disbursement
PEX Card - Office Supplies, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		25		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDDI

Amount of Each Disbursement this Period

38.80

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. The Movement Cooperative

Mailing Address 200 Schermerhorn St

City
BrooklynState
NYZip Code
11201-5889Purpose of Disbursement
Strategic Management Consulting

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		06		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TC3N

Amount of Each Disbursement this Period

3000.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. The Orleans Hotel

Mailing Address 4500 W Tropicana Ave

City
Las VegasState
NVZip Code
89103-5420Purpose of Disbursement
Catering and Room Rental for Event

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		24		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TC4I

Amount of Each Disbursement this Period

20847.90

Non-Contribution Account

☐ Memo Item

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

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

23847.90

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 157 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. TLC for Kids

Mailing Address 7301 Tulane Ave

City
Saint LouisState
MOZip Code
63130-2907Purpose of Disbursement
PEX Card - Child Care Services, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
08			05			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9TDDI

Amount of Each Disbursement this Period

190.00

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Toskr, Inc.Mailing Address 1330 Broadway
FI 3City
OaklandState
CAZip Code
94612-2503Purpose of Disbursement
Non-Federal Digital Communications

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
08			14			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9TC3T

Amount of Each Disbursement this Period

2572.39

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Toskr, Inc.Mailing Address 1330 Broadway
FI 3City
OaklandState
CAZip Code
94612-2503Purpose of Disbursement
Non-Federal Digital Communications

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
08			14			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9TC3'

Amount of Each Disbursement this Period

22282.16

Non-Contribution Account

☐ Memo Item

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

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

24854.55

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 158 OF 169

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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		02		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDD\

Amount of Each Disbursement this Period

21.77

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		02		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDD\

Amount of Each Disbursement this Period

50.07

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		02		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDD\

Amount of Each Disbursement this Period

18.20

* Non-Contribution Account

☒ Memo Item

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

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 159 OF 169

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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		02		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDD\

Amount of Each Disbursement this Period

21.03

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		03		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDD\

Amount of Each Disbursement this Period

20.06

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		04		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDD\

Amount of Each Disbursement this Period

20.04

* Non-Contribution Account

☒ Memo Item

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

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 160 OF 169

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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		04		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDE1

Amount of Each Disbursement this Period

20.02

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		05		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDE1

Amount of Each Disbursement this Period

19.76

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		05		2018

FEC Identification Number

C

Transaction ID : VTQ0M9TDE

Amount of Each Disbursement this Period

13.29

* Non-Contribution Account

☒ Memo Item

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

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 161 OF 169

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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : VTQ0M9TDE

Amount of Each Disbursement this Period

10.20

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	6			2	0	1	8		

FEC Identification Number

C

Transaction ID : VTQ0M9TDE4

Amount of Each Disbursement this Period

15.49

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : VTQ0M9TDE

Amount of Each Disbursement this Period

23.43

* Non-Contribution Account

☒ Memo Item

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

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 162 OF 169

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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : VTQ0M9TDE1

Amount of Each Disbursement this Period

57.39

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	4			2	0	1	8		

FEC Identification Number

C

Transaction ID : VTQ0M9TDE7

Amount of Each Disbursement this Period

35.80

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
Travel

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	7			2	0	1	8		

FEC Identification Number

C

Transaction ID : VTQ0M9TC41

Amount of Each Disbursement this Period

33.02

Non-Contribution Account

☐ Memo Item

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

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

33.02

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 163 OF 169

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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : VTQ0M9TDE

Amount of Each Disbursement this Period

14.76

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	9			2	0	1	8		

FEC Identification Number

C

Transaction ID : VTQ0M9TDE

Amount of Each Disbursement this Period

1.00

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
Travel

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : VTQ0M9TC4

Amount of Each Disbursement this Period

26.07

Non-Contribution Account

☐ Memo Item

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

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

26.07

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 164 OF 169

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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : VTQ0M9TDE/
Amount of Each Disbursement this Period

44.15

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : VTQ0M9TDE
Amount of Each Disbursement this Period

25.37

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. United Airlines

Mailing Address 233 S Wacker Dr

City
ChicagoState
ILZip Code
60606-6462Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	7			2	0	1	8		

FEC Identification Number

C

Transaction ID : VTQ0M9TDE
Amount of Each Disbursement this Period

480.40

* Non-Contribution Account

☒ Memo Item

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

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 165 OF 169

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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. United Airlines

Mailing Address 233 S Wacker Dr

City
ChicagoState
ILZip Code
60606-6462Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	4			2	0	1	8		

FEC Identification Number

C

Transaction ID : VTQ0M9TDEI

Amount of Each Disbursement this Period

511.00

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. United Airlines

Mailing Address 233 S Wacker Dr

City
ChicagoState
ILZip Code
60606-6462Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	4			2	0	1	8		

FEC Identification Number

C

Transaction ID : VTQ0M9TDEI

Amount of Each Disbursement this Period

442.40

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. United Airlines

Mailing Address 233 S Wacker Dr

City
ChicagoState
ILZip Code
60606-6462Purpose of Disbursement
PEX Card - Travel, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	9			2	0	1	8		

FEC Identification Number

C

Transaction ID : VTQ0M9TDEI

Amount of Each Disbursement this Period

553.00

* Non-Contribution Account

☒ Memo Item

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

0.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 166 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Verizon Wireless

Mailing Address 1 Verizon Way

City
Basking RidgeState
NJZip Code
07920-1097Purpose of Disbursement
PEX Card - Telephone Services, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : VTQ0M9TDEI

Amount of Each Disbursement this Period

947.81

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Violette Elise LLC

Mailing Address 18452 Gruebner St

City
DetroitState
MIZip Code
48234-3856Purpose of Disbursement
PEX Card - Flower Wall Rental, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : VTQ0M9TDEC

Amount of Each Disbursement this Period

475.00

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Walker, Alicia, , ,Mailing Address 1714 Franklin St
100-136City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	6			2	0	1	8		

FEC Identification Number

C

Transaction ID : VTQ0M9TC4

Amount of Each Disbursement this Period

732.00

Non-Contribution Account

☐ Memo Item

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

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

732.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 167 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Walker, Alicia, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2018

Mailing Address 1714 Franklin St
100-136City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9TC4

Amount of Each Disbursement this Period

732.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WillDolt Apparel

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2018

Mailing Address 850 Cesery Blvd, Ste 5

City
Southside EstatesState
FL

Zip Code

Purpose of Disbursement
PEX Card - T-Shirts, See Payment from 7/26/18

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9TDEM

Amount of Each Disbursement this Period

6000.00

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. WillDolt Apparel

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2018

Mailing Address 850 Cesery Blvd, Ste 5

City
Southside EstatesState
FL

Zip Code

Purpose of Disbursement
PEX Card - T-Shirts, See Payment from 7/26/18

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9TDE

Amount of Each Disbursement this Period

2560.00

* Non-Contribution Account

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

732.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 168 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Williams, Bradley, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		15		2018

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : VTQ0M9TCC

Amount of Each Disbursement this Period

2560.26

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Williams, James, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		15		2018

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : VTQ0M9TCC

Amount of Each Disbursement this Period

969.12

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Wood, Hope, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		15		2018

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : VTQ0M9TCC

Amount of Each Disbursement this Period

2568.85

Non-Contribution Account

☐ Memo Item

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

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

6098.23

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 169 OF 169

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Zters Inc.

Mailing Address 13727 Office Park Dr

City
HoustonState
TXZip Code
77070-2892Purpose of Disbursement
PEX Card - Waste Management Services, See Payment from 7/26/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M		D	D		Y	Y	Y	Y	Y	Y
0	8		1	8		2	0	1	8		

FEC Identification Number

C

Transaction ID : VTQ0M9TDEI

Amount of Each Disbursement this Period

340.00

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M		D	D		Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M		D	D		Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00

323075.13