

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**
Congressional Progressive Caucus PAC

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

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

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

5. Covering Period [MM] / [DD] / [YYYY] through [MM] / [DD] / [YYYY]
02 / 01 / 2022 through 02 / 28 / 2022

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Evans, Diane, , ,
Type or Print Name of Treasurer

Signature of Treasurer Evans, Diane, , , [Electronically Filed] Date 03 / 19 / 2022

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Congressional Progressive Caucus PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2022"/>		1596587.40
(b) Cash on Hand at Beginning of Reporting Period.....	1546990.05	
(c) Total Receipts (from Line 19)	115723.84	194884.81
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	1662713.89	1791472.21
7. Total Disbursements (from Line 31).....	125220.86	253979.18
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	1537493.03	1537493.03
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Congressional Progressive Caucus PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	8902.14	12971.06
(ii) Unitemized	81821.70	151913.75
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	90723.84	164884.81
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	25000.00	30000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	115723.84	194884.81
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	115723.84	194884.81
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	115723.84	194884.81

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	114269.86	242052.68
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	114269.86	242052.68
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10000.00	10000.00
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	951.00	1926.50
(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)).....	951.00	1926.50
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	125220.86	253979.18
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	125220.86	253979.18

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)	115723.84	194884.81
34. Total Contribution Refunds (from Line 28(d))	951.00	1926.50
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	114772.84	192958.31
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	114269.86	242052.68
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	114269.86	242052.68

**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 171
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Alexander, Millette, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 157 Roseville Rd
 City Westport State CT Zip Code 06880-2615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Pianist And Teacher
 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
 02 / 07 / 2022
Transaction ID : VR08C12R9811
 Amount of Each Receipt this Period
 7.00
 Memo Item

B. Alexander, Millette, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 157 Roseville Rd
 City Westport State CT Zip Code 06880-2615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Pianist And Teacher
 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
 02 / 14 / 2022
Transaction ID : VR08C12RS261
 Amount of Each Receipt this Period
 15.00
 Memo Item

C. Alexander, Millette, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 157 Roseville Rd
 City Westport State CT Zip Code 06880-2615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Pianist And Teacher
 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
 02 / 14 / 2022
Transaction ID : VR08C12RTWE7
 Amount of Each Receipt this Period
 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	32.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 171
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Alexander, Millette, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 157 Roseville Rd
 City Westport State CT Zip Code 06880-2615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Pianist And Teacher
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 218.00

Date of Receipt **02 / 21 / 2022**
Transaction ID : VR08C12RZFR8
 Amount of Each Receipt this Period 15.00
 Memo Item

B. Alexander, Millette, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 157 Roseville Rd
 City Westport State CT Zip Code 06880-2615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Pianist And Teacher
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 218.00

Date of Receipt **02 / 21 / 2022**
Transaction ID : VR08C12RZQ61
 Amount of Each Receipt this Period 7.00
 Memo Item

C. Alexander, Millette, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 157 Roseville Rd
 City Westport State CT Zip Code 06880-2615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Pianist And Teacher
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 218.00

Date of Receipt **02 / 21 / 2022**
Transaction ID : VR08C12S0BH2
 Amount of Each Receipt this Period 7.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	29.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 171
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Alexander, Millette, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 157 Roseville Rd

City Westport	State CT	Zip Code 06880-2615
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self-Employed	Occupation (for Individual) Pianist And Teacher
--	--

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
02	/	21	/	2022

Transaction ID : VR08C12S0HE1

Amount of Each Receipt this Period
5.00

Memo Item

B. Alexander, Millette, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 157 Roseville Rd

City Westport	State CT	Zip Code 06880-2615
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self-Employed	Occupation (for Individual) Pianist And Teacher
--	--

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
02	/	21	/	2022

Transaction ID : VR08C12S0MR6

Amount of Each Receipt this Period
6.00

Memo Item

C. Alexander, Millette, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 157 Roseville Rd

City Westport	State CT	Zip Code 06880-2615
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self-Employed	Occupation (for Individual) Pianist And Teacher
--	--

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
02	/	21	/	2022

Transaction ID : VR08C12S1AT9

Amount of Each Receipt this Period
7.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	18.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 171
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Alexander, Millette, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 157 Roseville Rd
 City Westport State CT Zip Code 06880-2615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Pianist And Teacher
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 218.00

Date of Receipt **02 / 21 / 2022**
Transaction ID : VR08C12S1G55
 Amount of Each Receipt this Period 5.00
 Memo Item

B. Alexander, Millette, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 157 Roseville Rd
 City Westport State CT Zip Code 06880-2615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Pianist And Teacher
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 218.00

Date of Receipt **02 / 28 / 2022**
Transaction ID : VR08C12SS2W8
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Antell, Lee, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1668 3Rd St SW
 City New Brighton State MN Zip Code 55112-3316
 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 ▼ 283.00

Date of Receipt **02 / 07 / 2022**
Transaction ID : VR08C12R8V13
 Amount of Each Receipt this Period 15.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	45.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 OF 171
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Antell, Lee, , ,

Mailing Address 1668 3Rd St SW

City New Brighton	State MN	Zip Code 55112-3316
----------------------	-------------	------------------------

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 ▼
283.00

Date of Receipt
MM / DD / YYYY
02 / 07 / 2022

Transaction ID : VR08C12R8V21

Amount of Each Receipt this Period
15.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Antell, Lee, , ,

Mailing Address 1668 3Rd St SW

City New Brighton	State MN	Zip Code 55112-3316
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
283.00

Date of Receipt
MM / DD / YYYY
02 / 07 / 2022

Transaction ID : VR08C12R8XN4

Amount of Each Receipt this Period
15.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Antell, Lee, , ,

Mailing Address 1668 3Rd St SW

City New Brighton	State MN	Zip Code 55112-3316
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
283.00

Date of Receipt
MM / DD / YYYY
02 / 07 / 2022

Transaction ID : VR08C12R8XP2

Amount of Each Receipt this Period
15.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	45.00
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 11 OF 171
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Antell, Lee, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1668 3Rd St SW
 City New Brighton State MN Zip Code 55112-3316
 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 ▼ 283.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12R9FY3
 Amount of Each Receipt this Period 15.00
 Memo Item

B. Antell, Lee, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1668 3Rd St SW
 City New Brighton State MN Zip Code 55112-3316
 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 ▼ 283.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12R9M16
 Amount of Each Receipt this Period 15.00
 Memo Item

C. Antell, Lee, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1668 3Rd St SW
 City New Brighton State MN Zip Code 55112-3316
 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 ▼ 283.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12R9PR1
 Amount of Each Receipt this Period 15.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 45.00
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 12 OF 171
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Antell, Lee, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1668 3Rd St SW
 City New Brighton State MN Zip Code 55112-3316
 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 ▼ 283.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12R9PS9
 Amount of Each Receipt this Period 15.00
 Memo Item

B. Antell, Lee, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1668 3Rd St SW
 City New Brighton State MN Zip Code 55112-3316
 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 ▼ 283.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12R9TP4
 Amount of Each Receipt this Period 15.00
 Memo Item

C. Antell, Lee, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1668 3Rd St SW
 City New Brighton State MN Zip Code 55112-3316
 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 ▼ 283.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12R9TQ2
 Amount of Each Receipt this Period 20.00
 Memo Item

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

50.00

**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 171
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Antell, Lee, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1668 3Rd St SW
 City New Brighton State MN Zip Code 55112-3316
 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 ▼ 283.00

Date of Receipt 02 / 07 / 2022
Transaction ID : VR08C12R9TR0
 Amount of Each Receipt this Period 15.00
 Memo Item

B. Antell, Lee, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1668 3Rd St SW
 City New Brighton State MN Zip Code 55112-3316
 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 ▼ 283.00

Date of Receipt 02 / 07 / 2022
Transaction ID : VR08C12RA3X9
 Amount of Each Receipt this Period 15.00
 Memo Item

C. Antell, Lee, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1668 3Rd St SW
 City New Brighton State MN Zip Code 55112-3316
 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 ▼ 283.00

Date of Receipt 02 / 14 / 2022
Transaction ID : VR08C12RS151
 Amount of Each Receipt this Period 15.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 45.00
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 171
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Antell, Lee, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1668 3Rd St SW
 City New Brighton State MN Zip Code 55112-3316
 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 ▼ 283.00

Date of Receipt 02 / 14 / 2022
Transaction ID : VR08C12RS643
 Amount of Each Receipt this Period 5.00
 Memo Item

B. Antell, Lee, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1668 3Rd St SW
 City New Brighton State MN Zip Code 55112-3316
 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 ▼ 283.00

Date of Receipt 02 / 14 / 2022
Transaction ID : VR08C12RT2Q2
 Amount of Each Receipt this Period 15.00
 Memo Item

C. Antell, Lee, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1668 3Rd St SW
 City New Brighton State MN Zip Code 55112-3316
 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 ▼ 283.00

Date of Receipt 02 / 14 / 2022
Transaction ID : VR08C12RTRP2
 Amount of Each Receipt this Period 30.00
 Memo Item

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

50.00

**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 171
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Antell, Lee, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1668 3Rd St SW
 City New Brighton State MN Zip Code 55112-3316
 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 ▼ 283.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2022
Transaction ID : VR08C12SQ0A5
 Amount of Each Receipt this Period
 2.50
 Memo Item

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

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RS204
 Amount of Each Receipt this Period
 15.00
 Memo Item

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

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RSZ95
 Amount of Each Receipt this Period
 15.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	32.50
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 171
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

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

Mailing Address 827 N Marion St

City Oak Park State IL Zip Code 60302-1532

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 270.00

Date of Receipt
 02 / 14 / 2022
Transaction ID : VR08C12RTZ29

Amount of Each Receipt this Period
 5.00

Memo Item

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

Mailing Address 827 N Marion St

City Oak Park State IL Zip Code 60302-1532

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 270.00

Date of Receipt
 02 / 21 / 2022
Transaction ID : VR08C12RZDM2

Amount of Each Receipt this Period
 15.00

Memo Item

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

Mailing Address 827 N Marion St

City Oak Park State IL Zip Code 60302-1532

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 270.00

Date of Receipt
 02 / 21 / 2022
Transaction ID : VR08C12S05B1

Amount of Each Receipt this Period
 5.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 25.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 171
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

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

Mailing Address 827 N Marion St

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
02	/	21	/	2022

Transaction ID : VR08C12S0NS7

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 827 N Marion St

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
02	/	27	/	2022

Transaction ID : VR08C12SRZJ3

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 827 N Marion St

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
02	/	27	/	2022

Transaction ID : VR08C12SRZK1

Amount of Each Receipt this Period
5.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 171
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Arie-Donch, Robin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5144 Blue Ct
 City Fairfield State CA Zip Code 94534-6630
 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 ▼ 214.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12R96M6
 Amount of Each Receipt this Period
 1.30
 Memo Item

B. Arie-Donch, Robin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5144 Blue Ct
 City Fairfield State CA Zip Code 94534-6630
 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 ▼ 214.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12RA766
 Amount of Each Receipt this Period
 3.00
 Memo Item

C. Arie-Donch, Robin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5144 Blue Ct
 City Fairfield State CA Zip Code 94534-6630
 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 ▼ 214.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RS1Q3
 Amount of Each Receipt this Period
 1.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	5.30
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 19 OF 171
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Arie-Donch, Robin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5144 Blue Ct
 City Fairfield State CA Zip Code 94534-6630
 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 ▼ 214.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RS5P4
 Amount of Each Receipt this Period
 1.00
 Memo Item

B. Arie-Donch, Robin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5144 Blue Ct
 City Fairfield State CA Zip Code 94534-6630
 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 ▼ 214.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RS7D7
 Amount of Each Receipt this Period
 1.00
 Memo Item

C. Arie-Donch, Robin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5144 Blue Ct
 City Fairfield State CA Zip Code 94534-6630
 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 ▼ 214.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RS9T3
 Amount of Each Receipt this Period
 1.50
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	3.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 171
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Arie-Donch, Robin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5144 Blue Ct
 City Fairfield State CA Zip Code 94534-6630
 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 ▼ 214.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RSKW1
 Amount of Each Receipt this Period 1.00
 Memo Item

B. Arie-Donch, Robin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5144 Blue Ct
 City Fairfield State CA Zip Code 94534-6630
 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 ▼ 214.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RSQZ4
 Amount of Each Receipt this Period 1.00
 Memo Item

C. Arie-Donch, Robin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5144 Blue Ct
 City Fairfield State CA Zip Code 94534-6630
 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 ▼ 214.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12RZKQ9
 Amount of Each Receipt this Period 1.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	3.00
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 21 OF 171
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Arie-Donch, Robin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5144 Blue Ct
 City Fairfield State CA Zip Code 94534-6630
 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 ▼ 214.00

Date of Receipt 02 / 27 / 2022
Transaction ID : VR08C12SQ1C4
 Amount of Each Receipt this Period 1.20
 Memo Item

B. Arie-Donch, Robin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5144 Blue Ct
 City Fairfield State CA Zip Code 94534-6630
 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 ▼ 214.00

Date of Receipt 02 / 27 / 2022
Transaction ID : VR08C12SRJ10
 Amount of Each Receipt this Period 1.00
 Memo Item

C. Bally, Al, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 29 Wheeler Rd
 City Marstons Mills State MA Zip Code 02648-1133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Designer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 238.56

Date of Receipt 02 / 07 / 2022
Transaction ID : VR08C12R96X7
 Amount of Each Receipt this Period 2.53
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 4.73
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 171
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

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

Mailing Address 29 Wheeler Rd

City Marstons Mills	State MA	Zip Code 02648-1133
------------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
238.56

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		07		2022

Transaction ID : VR08C12R9M73

Amount of Each Receipt this Period
4.11

Memo Item

B. Bally, Al, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 29 Wheeler Rd

City Marstons Mills	State MA	Zip Code 02648-1133
------------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
238.56

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		07		2022

Transaction ID : VR08C12RA3Q1

Amount of Each Receipt this Period
3.00

Memo Item

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

Mailing Address 29 Wheeler Rd

City Marstons Mills	State MA	Zip Code 02648-1133
------------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
238.56

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		14		2022

Transaction ID : VR08C12RTB02

Amount of Each Receipt this Period
3.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	10.11
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 23 OF 171
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Balter, Diane, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2672 McAllister St
 City San Francisco State CA Zip Code 94118-4113
 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 ▼ 444.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RSWH2
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. Balter, Diane, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2672 McAllister St
 City San Francisco State CA Zip Code 94118-4113
 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 ▼ 444.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RSWJ0
 Amount of Each Receipt this Period
 46.00
 Memo Item

C. Balter, Diane, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2672 McAllister St
 City San Francisco State CA Zip Code 94118-4113
 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 ▼ 444.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12S02K8
 Amount of Each Receipt this Period
 34.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 130.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 171
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Balter, Diane, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2672 McAllister St
 City San Francisco State CA Zip Code 94118-4113
 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 ▼ 444.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12S06V9
 Amount of Each Receipt this Period
 20.00
 Memo Item

B. Balter, Diane, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2672 McAllister St
 City San Francisco State CA Zip Code 94118-4113
 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 ▼ 444.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12S0TC3
 Amount of Each Receipt this Period
 20.00
 Memo Item

C. Balter, Diane, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2672 McAllister St
 City San Francisco State CA Zip Code 94118-4113
 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 ▼ 444.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2022
Transaction ID : VR08C12SQ7H5
 Amount of Each Receipt this Period
 45.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	85.00
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 171
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Beatus, Caryl, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 Long Lots Rd
 City Westport State CT Zip Code 06880-3846
 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 ▼ 256.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12RZ9B2
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. Beatus, Caryl, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 Long Lots Rd
 City Westport State CT Zip Code 06880-3846
 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 ▼ 256.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12RZGX8
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. Beatus, Caryl, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 Long Lots Rd
 City Westport State CT Zip Code 06880-3846
 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 ▼ 256.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12RZHP5
 Amount of Each Receipt this Period
 25.00
 Memo Item

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: (check only one)	PAGE 26 OF 171
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Beatus, Caryl, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 Long Lots Rd
 City Westport State CT Zip Code 06880-3846
 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 ▼ 256.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12S0S65
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. Beatus, Caryl, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 Long Lots Rd
 City Westport State CT Zip Code 06880-3846
 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 ▼ 256.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12S0S73
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. Beatus, Caryl, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 Long Lots Rd
 City Westport State CT Zip Code 06880-3846
 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 ▼ 256.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2022
Transaction ID : VR08C12SS3C5
 Amount of Each Receipt this Period
 6.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	56.00
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 27 OF 171
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Berger, Pat, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 Heath St
 City Brookline State MA Zip Code 02445-5926
 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 ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12S18R9
 Amount of Each Receipt this Period
 15.00
 Memo Item

B. Berger, Pat, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 Heath St
 City Brookline State MA Zip Code 02445-5926
 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 ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2022
Transaction ID : VR08C12SSCN4
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. Braun, Ida, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 Baldwin Ave Apt 709
 City San Mateo State CA Zip Code 94401-3851
 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 ▼ 290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12R96F6
 Amount of Each Receipt this Period
 30.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	145.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 171
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Braun, Ida, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 Baldwin Ave
 Apt 709
 City San Mateo State CA Zip Code 94401-3851
 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 ▼ 290.00

Date of Receipt 02 / 21 / 2022
Transaction ID : VR08C12S0F64
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Braun, Ida, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 Baldwin Ave
 Apt 709
 City San Mateo State CA Zip Code 94401-3851
 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 ▼ 290.00

Date of Receipt 02 / 21 / 2022
Transaction ID : VR08C12S1GN2
 Amount of Each Receipt this Period 15.00
 Memo Item

C. Bubenik, Patricia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 420 Homer Ave
 City Palo Alto State CA Zip Code 94301-2820
 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 ▼ 216.50

Date of Receipt 02 / 07 / 2022
Transaction ID : VR08C12R8SK9
 Amount of Each Receipt this Period 3.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	118.00
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 29 OF 171
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Bubenik, Patricia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 420 Homer Ave
 City Palo Alto State CA Zip Code 94301-2820
 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 ▼ 216.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12R8YK1
 Amount of Each Receipt this Period 5.00
 Memo Item

B. Bubenik, Patricia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 420 Homer Ave
 City Palo Alto State CA Zip Code 94301-2820
 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 ▼ 216.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12R91G4
 Amount of Each Receipt this Period 4.00
 Memo Item

C. Bubenik, Patricia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 420 Homer Ave
 City Palo Alto State CA Zip Code 94301-2820
 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 ▼ 216.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12R9AG2
 Amount of Each Receipt this Period 3.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 12.00
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 30 OF 171
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Bubenik, Patricia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 420 Homer Ave
 City Palo Alto State CA Zip Code 94301-2820
 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 ▼ 216.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12R9NV2
 Amount of Each Receipt this Period 4.00
 Memo Item

B. Bubenik, Patricia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 420 Homer Ave
 City Palo Alto State CA Zip Code 94301-2820
 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 ▼ 216.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12R9QB1
 Amount of Each Receipt this Period 3.00
 Memo Item

C. Bubenik, Patricia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 420 Homer Ave
 City Palo Alto State CA Zip Code 94301-2820
 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 ▼ 216.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12RA4G7
 Amount of Each Receipt this Period 3.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 10.00
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 31 OF 171 (check only one)
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Bubenik, Patricia, , ,

Mailing Address 420 Homer Ave

City Palo Alto	State CA	Zip Code 94301-2820
-------------------	-------------	------------------------

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 ▼
216.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12RA4H5

Amount of Each Receipt this Period
4.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Bubenik, Patricia, , ,

Mailing Address 420 Homer Ave

City Palo Alto	State CA	Zip Code 94301-2820
-------------------	-------------	------------------------

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 ▼
216.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12RA4J3

Amount of Each Receipt this Period
3.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Bubenik, Patricia, , ,

Mailing Address 420 Homer Ave

City Palo Alto	State CA	Zip Code 94301-2820
-------------------	-------------	------------------------

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 ▼
216.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RRV67

Amount of Each Receipt this Period
5.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	12.00
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 171
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Bubenik, Patricia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 420 Homer Ave
 City Palo Alto State CA Zip Code 94301-2820
 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 ▼ 216.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RS449
 Amount of Each Receipt this Period 5.00
 Memo Item

B. Bubenik, Patricia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 420 Homer Ave
 City Palo Alto State CA Zip Code 94301-2820
 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 ▼ 216.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RSB61
 Amount of Each Receipt this Period 5.00
 Memo Item

C. Bubenik, Patricia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 420 Homer Ave
 City Palo Alto State CA Zip Code 94301-2820
 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 ▼ 216.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RT523
 Amount of Each Receipt this Period 3.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 13.00
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 171
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Bubenik, Patricia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 420 Homer Ave
 City Palo Alto State CA Zip Code 94301-2820
 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 ▼ 216.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RT531
 Amount of Each Receipt this Period
 5.00
 Memo Item

B. Bubenik, Patricia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 420 Homer Ave
 City Palo Alto State CA Zip Code 94301-2820
 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 ▼ 216.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RT549
 Amount of Each Receipt this Period
 3.00
 Memo Item

C. Bubenik, Patricia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 420 Homer Ave
 City Palo Alto State CA Zip Code 94301-2820
 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 ▼ 216.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RTBP4
 Amount of Each Receipt this Period
 3.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 11.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 171
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Bubenik, Patricia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 420 Homer Ave
 City Palo Alto State CA Zip Code 94301-2820
 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 ▼ 216.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RTBQ1
 Amount of Each Receipt this Period
 4.00
 Memo Item

B. Bubenik, Patricia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 420 Homer Ave
 City Palo Alto State CA Zip Code 94301-2820
 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 ▼ 216.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RTBR9
 Amount of Each Receipt this Period
 5.00
 Memo Item

C. Bubenik, Patricia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 420 Homer Ave
 City Palo Alto State CA Zip Code 94301-2820
 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 ▼ 216.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12RZ9Y2
 Amount of Each Receipt this Period
 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	14.00
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 171
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Bubenik, Patricia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 420 Homer Ave
 City Palo Alto State CA Zip Code 94301-2820
 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 ▼ 216.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12RZHJ4
 Amount of Each Receipt this Period
 4.00
 Memo Item

B. Bubenik, Patricia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 420 Homer Ave
 City Palo Alto State CA Zip Code 94301-2820
 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 ▼ 216.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12RZYF7
 Amount of Each Receipt this Period
 3.00
 Memo Item

C. Bubenik, Patricia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 420 Homer Ave
 City Palo Alto State CA Zip Code 94301-2820
 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 ▼ 216.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12S0096
 Amount of Each Receipt this Period
 4.00
 Memo Item

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

11.00

**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 171
(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)
Congressional Progressive Caucus PAC

A. Bubenik, Patricia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 420 Homer Ave
 City Palo Alto State CA Zip Code 94301-2820
 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 ▼ 216.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12S00A4
 Amount of Each Receipt this Period 3.00
 Memo Item

B. Bubenik, Patricia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 420 Homer Ave
 City Palo Alto State CA Zip Code 94301-2820
 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 ▼ 216.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12S00B1
 Amount of Each Receipt this Period 6.00
 Memo Item

C. Bubenik, Patricia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 420 Homer Ave
 City Palo Alto State CA Zip Code 94301-2820
 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 ▼ 216.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12S00C9
 Amount of Each Receipt this Period 6.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 15.00
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 37 OF 171
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Bubenik, Patricia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 420 Homer Ave
 City Palo Alto State CA Zip Code 94301-2820
 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 ▼ 216.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12S02M6
 Amount of Each Receipt this Period
 6.00
 Memo Item

B. Bubenik, Patricia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 420 Homer Ave
 City Palo Alto State CA Zip Code 94301-2820
 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 ▼ 216.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12S07M6
 Amount of Each Receipt this Period
 6.00
 Memo Item

C. Bubenik, Patricia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 420 Homer Ave
 City Palo Alto State CA Zip Code 94301-2820
 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 ▼ 216.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12S0TD1
 Amount of Each Receipt this Period
 8.00
 Memo Item

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

20.00

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 171
(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)
Congressional Progressive Caucus PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Bubenik, Patricia, , ,

Mailing Address 420 Homer Ave

City Palo Alto	State CA	Zip Code 94301-2820
-------------------	-------------	------------------------

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 ▼
216.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022

Transaction ID : VR08C12S0TE9

Amount of Each Receipt this Period
3.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Bubenik, Patricia, , ,

Mailing Address 420 Homer Ave

City Palo Alto	State CA	Zip Code 94301-2820
-------------------	-------------	------------------------

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 ▼
216.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022

Transaction ID : VR08C12S0TF7

Amount of Each Receipt this Period
3.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Bubenik, Patricia, , ,

Mailing Address 420 Homer Ave

City Palo Alto	State CA	Zip Code 94301-2820
-------------------	-------------	------------------------

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 ▼
216.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022

Transaction ID : VR08C12S1F55

Amount of Each Receipt this Period
3.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	9.00
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 39 OF 171
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Bubenik, Patricia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 420 Homer Ave
 City Palo Alto State CA Zip Code 94301-2820
 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 ▼ 216.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2022
Transaction ID : VR08C12SPX42
 Amount of Each Receipt this Period 6.00
 Memo Item

B. Bubenik, Patricia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 420 Homer Ave
 City Palo Alto State CA Zip Code 94301-2820
 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 ▼ 216.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2022
Transaction ID : VR08C12SQDK4
 Amount of Each Receipt this Period 3.00
 Memo Item

C. Bubenik, Patricia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 420 Homer Ave
 City Palo Alto State CA Zip Code 94301-2820
 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 ▼ 216.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2022
Transaction ID : VR08C12SQMS5
 Amount of Each Receipt this Period 3.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 12.00
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 171
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Bubenik, Patricia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 420 Homer Ave
 City Palo Alto State CA Zip Code 94301-2820
 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 ▼ 216.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2022
Transaction ID : VR08C12SQQQ7
 Amount of Each Receipt this Period
 5.00
 Memo Item

B. Bubenik, Patricia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 420 Homer Ave
 City Palo Alto State CA Zip Code 94301-2820
 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 ▼ 216.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2022
Transaction ID : VR08C12SRBE7
 Amount of Each Receipt this Period
 4.00
 Memo Item

C. Bubenik, Patricia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 420 Homer Ave
 City Palo Alto State CA Zip Code 94301-2820
 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 ▼ 216.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2022
Transaction ID : VR08C12SRD52
 Amount of Each Receipt this Period
 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 14.00
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 171
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Bubenik, Patricia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 420 Homer Ave
 City Palo Alto State CA Zip Code 94301-2820
 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 ▼ 216.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2022
Transaction ID : VR08C12SRD60
 Amount of Each Receipt this Period
 5.00
 Memo Item

B. Bubenik, Patricia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 420 Homer Ave
 City Palo Alto State CA Zip Code 94301-2820
 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 ▼ 216.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2022
Transaction ID : VR08C12SRD78
 Amount of Each Receipt this Period
 3.00
 Memo Item

C. Bubenik, Patricia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 420 Homer Ave
 City Palo Alto State CA Zip Code 94301-2820
 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 ▼ 216.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2022
Transaction ID : VR08C12SRD86
 Amount of Each Receipt this Period
 4.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	12.00
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 42 OF 171
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Bubenik, Patricia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 420 Homer Ave
 City Palo Alto State CA Zip Code 94301-2820
 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 ▼ 216.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2022
Transaction ID : VR08C12SRM71
 Amount of Each Receipt this Period
 3.00
 Memo Item

B. Canario, Penelope, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6045 Calle De Rico
 City San Jose State CA Zip Code 95124-6543
 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 ▼ 228.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12R9282
 Amount of Each Receipt this Period
 5.00
 Memo Item

C. Canario, Penelope, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6045 Calle De Rico
 City San Jose State CA Zip Code 95124-6543
 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 ▼ 228.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12RA122
 Amount of Each Receipt this Period
 3.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	11.00
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 43 OF 171
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Canario, Penelope, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6045 Calle De Rico
 City San Jose State CA Zip Code 95124-6543
 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 ▼ 228.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RRYT0
 Amount of Each Receipt this Period
 4.50
 Memo Item

B. Canario, Penelope, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6045 Calle De Rico
 City San Jose State CA Zip Code 95124-6543
 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 ▼ 228.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RRZ49
 Amount of Each Receipt this Period
 4.00
 Memo Item

C. Canario, Penelope, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6045 Calle De Rico
 City San Jose State CA Zip Code 95124-6543
 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 ▼ 228.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RS7T9
 Amount of Each Receipt this Period
 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	13.50
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 44 OF 171
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Canario, Penelope, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6045 Calle De Rico
 City San Jose State CA Zip Code 95124-6543
 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 ▼ 228.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RSVTO
 Amount of Each Receipt this Period
 3.00
 Memo Item

B. Canario, Penelope, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6045 Calle De Rico
 City San Jose State CA Zip Code 95124-6543
 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 ▼ 228.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12S0E79
 Amount of Each Receipt this Period
 3.00
 Memo Item

C. Canario, Penelope, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6045 Calle De Rico
 City San Jose State CA Zip Code 95124-6543
 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 ▼ 228.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12S0HG7
 Amount of Each Receipt this Period
 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	11.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 171
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Canario, Penelope, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6045 Calle De Rico
 City San Jose State CA Zip Code 95124-6543
 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 ▼ 228.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12S0HN6
 Amount of Each Receipt this Period
 4.50
 Memo Item

B. Canario, Penelope, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6045 Calle De Rico
 City San Jose State CA Zip Code 95124-6543
 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 ▼ 228.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2022
Transaction ID : VR08C12SQM09
 Amount of Each Receipt this Period
 4.00
 Memo Item

C. Canario, Penelope, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6045 Calle De Rico
 City San Jose State CA Zip Code 95124-6543
 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 ▼ 228.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2022
Transaction ID : VR08C12SR054
 Amount of Each Receipt this Period
 3.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	11.50
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 46 OF 171
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Canario, Penelope, , ,

Mailing Address 6045 Calle De Rico

City San Jose	State CA	Zip Code 95124-6543
------------------	-------------	------------------------

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 ▼
 228.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2022

Transaction ID : VR08C12SRAD9

Amount of Each Receipt this Period
 4.50

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Canario, Penelope, , ,

Mailing Address 6045 Calle De Rico

City San Jose	State CA	Zip Code 95124-6543
------------------	-------------	------------------------

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 ▼
 228.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2022

Transaction ID : VR08C12SRNQ0

Amount of Each Receipt this Period
 3.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Canario, Penelope, , ,

Mailing Address 6045 Calle De Rico

City San Jose	State CA	Zip Code 95124-6543
------------------	-------------	------------------------

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 ▼
 228.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2022

Transaction ID : VR08C12SS639

Amount of Each Receipt this Period
 3.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	10.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 171
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Canario, Penelope, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6045 Calle De Rico
 City San Jose State CA Zip Code 95124-6543
 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 ▼ 228.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2022
Transaction ID : VR08C12SSBA4
 Amount of Each Receipt this Period 4.50
 Memo Item

B. Canario, Penelope, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6045 Calle De Rico
 City San Jose State CA Zip Code 95124-6543
 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 ▼ 228.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2022
Transaction ID : VR08C12SSK85
 Amount of Each Receipt this Period 35.00
 Memo Item

C. Cargill, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4242 Lomo Alto Dr
 City Dallas State TX Zip Code 75219-1506
 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 ▼ 248.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12R8XQ0
 Amount of Each Receipt this Period 15.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	54.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 171
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Cargill, Robert, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4242 Lomo Alto Dr

City Dallas	State TX	Zip Code 75219-1506
----------------	-------------	------------------------

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 ▼
248.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		07		2022

Transaction ID : VR08C12R8Y35

Amount of Each Receipt this Period
15.00

Memo Item

B. Cargill, Robert, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4242 Lomo Alto Dr

City Dallas	State TX	Zip Code 75219-1506
----------------	-------------	------------------------

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 ▼
248.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		07		2022

Transaction ID : VR08C12R9G58

Amount of Each Receipt this Period
15.00

Memo Item

C. Cargill, Robert, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4242 Lomo Alto Dr

City Dallas	State TX	Zip Code 75219-1506
----------------	-------------	------------------------

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 ▼
248.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		07		2022

Transaction ID : VR08C12R9VA0

Amount of Each Receipt this Period
15.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	45.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 49 OF 171
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Cargill, Robert, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4242 Lomo Alto Dr

City Dallas	State TX	Zip Code 75219-1506
----------------	-------------	------------------------

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 ▼
248.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	14	/	2022

Transaction ID : VR08C12RSJP1

Amount of Each Receipt this Period
15.00

Memo Item

B. Cargill, Robert, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4242 Lomo Alto Dr

City Dallas	State TX	Zip Code 75219-1506
----------------	-------------	------------------------

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 ▼
248.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	14	/	2022

Transaction ID : VR08C12RT744

Amount of Each Receipt this Period
35.00

Memo Item

C. Cargill, Robert, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4242 Lomo Alto Dr

City Dallas	State TX	Zip Code 75219-1506
----------------	-------------	------------------------

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 ▼
248.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	14	/	2022

Transaction ID : VR08C12RTFH3

Amount of Each Receipt this Period
15.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	65.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 171
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Cargill, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4242 Lomo Alto Dr
 City Dallas State TX Zip Code 75219-1506
 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 ▼ 248.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12RZM99
 Amount of Each Receipt this Period
 15.00
 Memo Item

B. Cargill, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4242 Lomo Alto Dr
 City Dallas State TX Zip Code 75219-1506
 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 ▼ 248.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12S0C83
 Amount of Each Receipt this Period
 15.00
 Memo Item

C. Cargill, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4242 Lomo Alto Dr
 City Dallas State TX Zip Code 75219-1506
 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 ▼ 248.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2022
Transaction ID : VR08C12SS544
 Amount of Each Receipt this Period
 15.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	40.50
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 171
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Choyke, Wolfgang, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5424 Kipling Rd
 City Pittsburgh State PA Zip Code 15217-1038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) University Of Pittsburgh Occupation (for Individual) Physicist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 309.00

Date of Receipt 02 / 07 / 2022
Transaction ID : VR08C12R8WP9
 Amount of Each Receipt this Period 3.00
 Memo Item

B. Choyke, Wolfgang, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5424 Kipling Rd
 City Pittsburgh State PA Zip Code 15217-1038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) University Of Pittsburgh Occupation (for Individual) Physicist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 309.00

Date of Receipt 02 / 07 / 2022
Transaction ID : VR08C12R9WD7
 Amount of Each Receipt this Period 3.00
 Memo Item

C. Choyke, Wolfgang, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5424 Kipling Rd
 City Pittsburgh State PA Zip Code 15217-1038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) University Of Pittsburgh Occupation (for Individual) Physicist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 309.00

Date of Receipt 02 / 27 / 2022
Transaction ID : VR08C12SR9R3
 Amount of Each Receipt this Period 3.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 9.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 52 OF 171
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Choyke, Wolfgang, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5424 Kipling Rd
 City Pittsburgh State PA Zip Code 15217-1038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) University Of Pittsburgh Occupation (for Individual) Physicist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 309.00

Date of Receipt 02 / 27 / 2022
Transaction ID : VR08C12SREY0
 Amount of Each Receipt this Period 300.00
 Memo Item

B. Conlon, Ed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2229 Seaver Ln
 City Hoffman Estates State IL Zip Code 60169-5013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) IT Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.50

Date of Receipt 02 / 07 / 2022
Transaction ID : VR08C12R8W55
 Amount of Each Receipt this Period 10.00
 Memo Item

C. Conlon, Ed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2229 Seaver Ln
 City Hoffman Estates State IL Zip Code 60169-5013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) IT Consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 385.50

Date of Receipt 02 / 07 / 2022
Transaction ID : VR08C12R8Y01
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	320.00
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 53 OF 171
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Conlon, Ed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2229 Seaver Ln
 City Hoffman Estates State IL Zip Code 60169-5013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) IT Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12R8Y19
 Amount of Each Receipt this Period
 5.00
 Memo Item

B. Conlon, Ed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2229 Seaver Ln
 City Hoffman Estates State IL Zip Code 60169-5013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) IT Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12R92B5
 Amount of Each Receipt this Period
 5.00
 Memo Item

C. Conlon, Ed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2229 Seaver Ln
 City Hoffman Estates State IL Zip Code 60169-5013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) IT Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RS1A0
 Amount of Each Receipt this Period
 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	15.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 171
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Conlon, Ed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2229 Seaver Ln
 City Hoffman Estates State IL Zip Code 60169-5013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) IT Consultant
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **385.50**

Date of Receipt **02 / 14 / 2022**
Transaction ID : VR08C12RS1B8
 Amount of Each Receipt this Period **10.00**
 Memo Item

B. Conlon, Ed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2229 Seaver Ln
 City Hoffman Estates State IL Zip Code 60169-5013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) IT Consultant
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **385.50**

Date of Receipt **02 / 14 / 2022**
Transaction ID : VR08C12RS1C6
 Amount of Each Receipt this Period **10.00**
 Memo Item

C. Conlon, Ed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2229 Seaver Ln
 City Hoffman Estates State IL Zip Code 60169-5013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) IT Consultant
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **385.50**

Date of Receipt **02 / 14 / 2022**
Transaction ID : VR08C12RS1D4
 Amount of Each Receipt this Period **15.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	35.00
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 55 OF 171
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Conlon, Ed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2229 Seaver Ln
 City Hoffman Estates State IL Zip Code 60169-5013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) IT Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.50

Date of Receipt 02 / 14 / 2022
Transaction ID : VR08C12RS1S9
 Amount of Each Receipt this Period 10.00
 Memo Item

B. Conlon, Ed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2229 Seaver Ln
 City Hoffman Estates State IL Zip Code 60169-5013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) IT Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.50

Date of Receipt 02 / 14 / 2022
Transaction ID : VR08C12RS1T7
 Amount of Each Receipt this Period 10.00
 Memo Item

C. Conlon, Ed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2229 Seaver Ln
 City Hoffman Estates State IL Zip Code 60169-5013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) IT Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.50

Date of Receipt 02 / 14 / 2022
Transaction ID : VR08C12RS2C9
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 30.00
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 56 OF 171
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Conlon, Ed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2229 Seaver Ln
 City Hoffman Estates State IL Zip Code 60169-5013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) IT Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RS2W3
 Amount of Each Receipt this Period 10.00
 Memo Item

B. Conlon, Ed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2229 Seaver Ln
 City Hoffman Estates State IL Zip Code 60169-5013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) IT Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RS2X1
 Amount of Each Receipt this Period 5.00
 Memo Item

C. Conlon, Ed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2229 Seaver Ln
 City Hoffman Estates State IL Zip Code 60169-5013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) IT Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RS2Y9
 Amount of Each Receipt this Period 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 20.00
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 57 OF 171
	(check only one)	
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<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2229 Seaver Ln
 City Hoffman Estates State IL Zip Code 60169-5013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) IT Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RS4P1
 Amount of Each Receipt this Period
 5.00
 Memo Item

B. Conlon, Ed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2229 Seaver Ln
 City Hoffman Estates State IL Zip Code 60169-5013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) IT Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RS5S6
 Amount of Each Receipt this Period
 10.00
 Memo Item

C. Conlon, Ed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2229 Seaver Ln
 City Hoffman Estates State IL Zip Code 60169-5013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) IT Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.50

Date of Receipt
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 02 / 14 / 2022
Transaction ID : VR08C12RS5T4
 Amount of Each Receipt this Period
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 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 25.00
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 58 OF 171
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2229 Seaver Ln
 City Hoffman Estates State IL Zip Code 60169-5013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) IT Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.50

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RS5V2
 Amount of Each Receipt this Period
 10.00
 Memo Item

B. Conlon, Ed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2229 Seaver Ln
 City Hoffman Estates State IL Zip Code 60169-5013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) IT Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.50

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RS5W0
 Amount of Each Receipt this Period
 5.00
 Memo Item

C. Conlon, Ed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2229 Seaver Ln
 City Hoffman Estates State IL Zip Code 60169-5013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) IT Consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 385.50

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RS9W9
 Amount of Each Receipt this Period
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 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 19.50
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 59 OF 171
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
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 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2229 Seaver Ln
 City Hoffman Estates State IL Zip Code 60169-5013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) IT Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RSHA5
 Amount of Each Receipt this Period 5.00
 Memo Item

B. Conlon, Ed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2229 Seaver Ln
 City Hoffman Estates State IL Zip Code 60169-5013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) IT Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RSM10
 Amount of Each Receipt this Period 5.00
 Memo Item

C. Conlon, Ed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2229 Seaver Ln
 City Hoffman Estates State IL Zip Code 60169-5013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) IT Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RSM28
 Amount of Each Receipt this Period 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 15.00
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 60 OF 171
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Conlon, Ed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2229 Seaver Ln
 City Hoffman Estates State IL Zip Code 60169-5013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) IT Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RSMX1
 Amount of Each Receipt this Period
 4.00
 Memo Item

B. Conlon, Ed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2229 Seaver Ln
 City Hoffman Estates State IL Zip Code 60169-5013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) IT Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RSR27
 Amount of Each Receipt this Period
 10.00
 Memo Item

C. Conlon, Ed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2229 Seaver Ln
 City Hoffman Estates State IL Zip Code 60169-5013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) IT Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RSR35
 Amount of Each Receipt this Period
 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 24.00
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 171
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
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		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Conlon, Ed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2229 Seaver Ln
 City Hoffman Estates State IL Zip Code 60169-5013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) IT Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RSR43
 Amount of Each Receipt this Period
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 Memo Item

B. Conlon, Ed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2229 Seaver Ln
 City Hoffman Estates State IL Zip Code 60169-5013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) IT Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RTB28
 Amount of Each Receipt this Period
 10.00
 Memo Item

C. Conlon, Ed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2229 Seaver Ln
 City Hoffman Estates State IL Zip Code 60169-5013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) IT Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RTB35
 Amount of Each Receipt this Period
 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	25.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 171
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
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		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Conlon, Ed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2229 Seaver Ln
 City Hoffman Estates State IL Zip Code 60169-5013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) IT Consultant
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 385.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RTB43
 Amount of Each Receipt this Period
 10.00
 Memo Item

B. Conlon, Ed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2229 Seaver Ln
 City Hoffman Estates State IL Zip Code 60169-5013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) IT Consultant
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 385.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RTB51
 Amount of Each Receipt this Period
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 Memo Item

C. Conlon, Ed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2229 Seaver Ln
 City Hoffman Estates State IL Zip Code 60169-5013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) IT Consultant
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 385.50

Date of Receipt
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 02 / 14 / 2022
Transaction ID : VR08C12RTBW1
 Amount of Each Receipt this Period
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 Memo Item

SUBTOTAL of Receipts This Page (optional).....	25.00
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 63 OF 171
	(check only one)	
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<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
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 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
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 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) IT Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RTKT4
 Amount of Each Receipt this Period
 10.00
 Memo Item

B. Conlon, Ed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2229 Seaver Ln
 City Hoffman Estates State IL Zip Code 60169-5013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) IT Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RTKV1
 Amount of Each Receipt this Period
 10.00
 Memo Item

C. Conlon, Ed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2229 Seaver Ln
 City Hoffman Estates State IL Zip Code 60169-5013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) IT Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RTKW9
 Amount of Each Receipt this Period
 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	30.00
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 64 OF 171
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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 Name of Employer (for Individual) Self-Employed Occupation (for Individual) IT Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RTKX7
 Amount of Each Receipt this Period 10.00
 Memo Item

B. Conlon, Ed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2229 Seaver Ln
 City Hoffman Estates State IL Zip Code 60169-5013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) IT Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RTKY5
 Amount of Each Receipt this Period 10.00
 Memo Item

C. Conlon, Ed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2229 Seaver Ln
 City Hoffman Estates State IL Zip Code 60169-5013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) IT Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RTKZ3
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 30.00
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 65 OF 171
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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 Name of Employer (for Individual) Self-Employed Occupation (for Individual) IT Consultant
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 385.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12RZHS9
 Amount of Each Receipt this Period
 4.00
 Memo Item

B. Conlon, Ed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2229 Seaver Ln
 City Hoffman Estates State IL Zip Code 60169-5013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) IT Consultant
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 385.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12RZZG8
 Amount of Each Receipt this Period
 4.00
 Memo Item

C. Conlon, Ed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2229 Seaver Ln
 City Hoffman Estates State IL Zip Code 60169-5013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) IT Consultant
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 385.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12S0216
 Amount of Each Receipt this Period
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 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 13.00
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 66 OF 171
	(check only one)	
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<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Conlon, Ed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2229 Seaver Ln
 City Hoffman Estates State IL Zip Code 60169-5013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) IT Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12S04S9
 Amount of Each Receipt this Period
 4.00
 Memo Item

B. Conlon, Ed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2229 Seaver Ln
 City Hoffman Estates State IL Zip Code 60169-5013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) IT Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12S0QX1
 Amount of Each Receipt this Period
 5.00
 Memo Item

C. Conlon, Ed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2229 Seaver Ln
 City Hoffman Estates State IL Zip Code 60169-5013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) IT Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2022
Transaction ID : VR08C12SQ735
 Amount of Each Receipt this Period
 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	14.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 171
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Conlon, Ed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2229 Seaver Ln
 City Hoffman Estates State IL Zip Code 60169-5013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) IT Consultant
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **385.50**

Date of Receipt **02 / 27 / 2022**
Transaction ID : VR08C12SQ9K5
 Amount of Each Receipt this Period **5.00**
 Memo Item

B. Conlon, Ed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2229 Seaver Ln
 City Hoffman Estates State IL Zip Code 60169-5013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) IT Consultant
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **385.50**

Date of Receipt **02 / 27 / 2022**
Transaction ID : VR08C12SQHB0
 Amount of Each Receipt this Period **5.00**
 Memo Item

C. Conlon, Ed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2229 Seaver Ln
 City Hoffman Estates State IL Zip Code 60169-5013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) IT Consultant
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **385.50**

Date of Receipt **02 / 27 / 2022**
Transaction ID : VR08C12SREH7
 Amount of Each Receipt this Period **5.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	15.00
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 68 OF 171
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Conlon, Ed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2229 Seaver Ln
 City Hoffman Estates State IL Zip Code 60169-5013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) IT Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2022
Transaction ID : VR08C12SRTN5
 Amount of Each Receipt this Period
 5.00
 Memo Item

B. Conlon, Ed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2229 Seaver Ln
 City Hoffman Estates State IL Zip Code 60169-5013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) IT Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2022
Transaction ID : VR08C12SRTP3
 Amount of Each Receipt this Period
 5.00
 Memo Item

C. Conlon, Ed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2229 Seaver Ln
 City Hoffman Estates State IL Zip Code 60169-5013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) IT Consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 385.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2022
Transaction ID : VR08C12SRTQ0
 Amount of Each Receipt this Period
 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	20.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 171
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Conlon, Ed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2229 Seaver Ln
 City Hoffman Estates State IL Zip Code 60169-5013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) IT Consultant
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 385.50

Date of Receipt 02 / 28 / 2022
Transaction ID : VR08C12SSCW9
 Amount of Each Receipt this Period 10.00
 Memo Item

B. Cornelius, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5991 Greenwillow Ln S
 City Jacksonville State FL Zip Code 32277-1639
 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 210.00

Date of Receipt 02 / 14 / 2022
Transaction ID : VR08C12RSET5
 Amount of Each Receipt this Period 5.00
 Memo Item

C. Cornelius, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5991 Greenwillow Ln S
 City Jacksonville State FL Zip Code 32277-1639
 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 210.00

Date of Receipt 02 / 27 / 2022
Transaction ID : VR08C12SQF49
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... **115.00**
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 70 OF 171
(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)
Congressional Progressive Caucus PAC

A. Egan, Kimberlee, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6189 Willow Hill Ct
 City Florence State KY Zip Code 41042-9779
 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 ▼ 405.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RS119
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. Egan, Kimberlee, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6189 Willow Hill Ct
 City Florence State KY Zip Code 41042-9779
 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 ▼ 405.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RTR66
 Amount of Each Receipt this Period
 200.00
 Memo Item

C. Egan, Kimberlee, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6189 Willow Hill Ct
 City Florence State KY Zip Code 41042-9779
 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 ▼ 405.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12RZ9H9
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
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 71 OF 171
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Egan, Kimberlee, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6189 Willow Hill Ct
 City Florence State KY Zip Code 41042-9779
 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 ▼ 405.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12S0BZ2
 Amount of Each Receipt this Period
 70.00
 Memo Item

B. Egan, Kimberlee, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6189 Willow Hill Ct
 City Florence State KY Zip Code 41042-9779
 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 ▼ 405.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12S0XX4
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. Gallt, Nancy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 273 Charlton Ave
 City South Orange State NJ Zip Code 07079-2342
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Literary Agent
 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
 02 / 21 / 2022
Transaction ID : VR08C12S0HW1
 Amount of Each Receipt this Period
 15.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	120.00
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 72 OF 171
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Gallt, Nancy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 273 Charlton Ave
 City South Orange State NJ Zip Code 07079-2342
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Literary Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 02 / 27 / 2022
Transaction ID : VR08C12SQSK9
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Giancarlo, Kathleen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 760 Grand Marais St
 City Grosse Pointe Park State MI Zip Code 48230-1849
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ogrady Properties Llc Occupation (for Individual) Real Estate Investment & Management
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 232.00

Date of Receipt 02 / 07 / 2022
Transaction ID : VR08C12R9XK7
 Amount of Each Receipt this Period 10.00
 Memo Item

C. Giancarlo, Kathleen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 760 Grand Marais St
 City Grosse Pointe Park State MI Zip Code 48230-1849
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ogrady Properties Llc Occupation (for Individual) Real Estate Investment & Management
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 232.00

Date of Receipt 02 / 07 / 2022
Transaction ID : VR08C12RA0W5
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 145.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 171
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Giancarlo, Kathleen, , ,

Mailing Address 760 Grand Marais St

City Grosse Pointe Park	State MI	Zip Code 48230-1849
----------------------------	-------------	------------------------

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

Name of Employer (for Individual) Ogrady Properties Llc	Occupation (for Individual) Real Estate Investment & Management
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
232.00

Date of Receipt
MM / DD / YYYY
02 / 21 / 2022

Transaction ID : VR08C12RZAF6

Amount of Each Receipt this Period
6.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Giancarlo, Kathleen, , ,

Mailing Address 760 Grand Marais St

City Grosse Pointe Park	State MI	Zip Code 48230-1849
----------------------------	-------------	------------------------

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

Name of Employer (for Individual) Ogrady Properties Llc	Occupation (for Individual) Real Estate Investment & Management
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
232.00

Date of Receipt
MM / DD / YYYY
02 / 27 / 2022

Transaction ID : VR08C12SRWY1

Amount of Each Receipt this Period
35.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Giancarlo, Kathleen, , ,

Mailing Address 760 Grand Marais St

City Grosse Pointe Park	State MI	Zip Code 48230-1849
----------------------------	-------------	------------------------

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

Name of Employer (for Individual) Ogrady Properties Llc	Occupation (for Individual) Real Estate Investment & Management
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
232.00

Date of Receipt
MM / DD / YYYY
02 / 28 / 2022

Transaction ID : VR08C12SS671

Amount of Each Receipt this Period
15.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	56.00
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 74 OF 171
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Giancarlo, Kathleen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 760 Grand Marais St
 City Grosse Pointe Park State MI Zip Code 48230-1849
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ogrady Properties Llc Occupation (for Individual) Real Estate Investment & Management
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 232.00

Date of Receipt 02 / 28 / 2022
Transaction ID : VR08C12SSDR9
 Amount of Each Receipt this Period 15.00
 Memo Item

B. Glatt, Freda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7173 Orange Dr Apt 122
 City Davie State FL Zip Code 33314-3103
 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 ▼ 279.00

Date of Receipt 02 / 07 / 2022
Transaction ID : VR08C12R8TR2
 Amount of Each Receipt this Period 15.00
 Memo Item

C. Glatt, Freda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7173 Orange Dr Apt 122
 City Davie State FL Zip Code 33314-3103
 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 ▼ 279.00

Date of Receipt 02 / 07 / 2022
Transaction ID : VR08C12R9515
 Amount of Each Receipt this Period 15.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 45.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 171
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Glatt, Freda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7173 Orange Dr
 Apt 122
 City Davie State FL Zip Code 33314-3103
 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 ▼ 279.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12R9DK2
 Amount of Each Receipt this Period
 15.00
 Memo Item

B. Glatt, Freda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7173 Orange Dr
 Apt 122
 City Davie State FL Zip Code 33314-3103
 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 ▼ 279.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RTEF74
 Amount of Each Receipt this Period
 11.00
 Memo Item

C. Goren, Carolyn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 7189
 City Missoula State MT Zip Code 59807-7189
 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 ▼ 914.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12R8YC6
 Amount of Each Receipt this Period
 3.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	29.00
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 76 OF 171
(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)
Congressional Progressive Caucus PAC

A. Goren, Carolyn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 7189
 City Missoula State MT Zip Code 59807-7189
 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 ▼ 914.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12R91Z2
 Amount of Each Receipt this Period 5.00
 Memo Item

B. Goren, Carolyn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 7189
 City Missoula State MT Zip Code 59807-7189
 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 ▼ 914.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12R9200
 Amount of Each Receipt this Period 5.00
 Memo Item

C. Goren, Carolyn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 7189
 City Missoula State MT Zip Code 59807-7189
 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 ▼ 914.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12R9G16
 Amount of Each Receipt this Period 15.00
 Memo Item

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

25.00

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

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

FOR LINE NUMBER: PAGE 77 OF 171
(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)
Congressional Progressive Caucus PAC

A. Goren, Carolyn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 7189
 City Missoula State MT Zip Code 59807-7189
 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 ▼ 914.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12R9TZ5
 Amount of Each Receipt this Period 15.00
 Memo Item

B. Goren, Carolyn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 7189
 City Missoula State MT Zip Code 59807-7189
 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 ▼ 914.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12R9V03
 Amount of Each Receipt this Period 35.00
 Memo Item

C. Goren, Carolyn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 7189
 City Missoula State MT Zip Code 59807-7189
 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 ▼ 914.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12RABB2
 Amount of Each Receipt this Period 3.00
 Memo Item

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

53.00

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

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

FOR LINE NUMBER: PAGE 78 OF 171
(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)
Congressional Progressive Caucus PAC

A. Goren, Carolyn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 7189
 City Missoula State MT Zip Code 59807-7189
 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 ▼ 914.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RRYD7
 Amount of Each Receipt this Period 5.00
 Memo Item

B. Goren, Carolyn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 7189
 City Missoula State MT Zip Code 59807-7189
 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 ▼ 914.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RS184
 Amount of Each Receipt this Period 35.00
 Memo Item

C. Goren, Carolyn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 7189
 City Missoula State MT Zip Code 59807-7189
 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 ▼ 914.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RS192
 Amount of Each Receipt this Period 35.00
 Memo Item

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: PAGE 79 OF 171
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Goren, Carolyn, , ,

Mailing Address PO Box 7189

City Missoula State MT Zip Code 59807-7189

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 ▼
 914.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022

Transaction ID : VR08C12RS1H5

Amount of Each Receipt this Period
 10.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Goren, Carolyn, , ,

Mailing Address PO Box 7189

City Missoula State MT Zip Code 59807-7189

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 ▼
 914.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022

Transaction ID : VR08C12RS1J3

Amount of Each Receipt this Period
 15.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Goren, Carolyn, , ,

Mailing Address PO Box 7189

City Missoula State MT Zip Code 59807-7189

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 ▼
 914.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022

Transaction ID : VR08C12RS8Y2

Amount of Each Receipt this Period
 15.00

Memo Item

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 80 OF 171
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Goren, Carolyn, , ,

Mailing Address PO Box 7189

City Missoula State MT Zip Code 59807-7189

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 ▼
 914.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022

Transaction ID : VR08C12RSE83

Amount of Each Receipt this Period
 35.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Goren, Carolyn, , ,

Mailing Address PO Box 7189

City Missoula State MT Zip Code 59807-7189

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 ▼
 914.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022

Transaction ID : VR08C12RSEY7

Amount of Each Receipt this Period
 25.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Goren, Carolyn, , ,

Mailing Address PO Box 7189

City Missoula State MT Zip Code 59807-7189

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 ▼
 914.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022

Transaction ID : VR08C12RT2X0

Amount of Each Receipt this Period
 20.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 80.00

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 81 OF 171
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Goren, Carolyn, , ,

Mailing Address PO Box 7189

City Missoula State MT Zip Code 59807-7189

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 ▼
 914.00

Date of Receipt
 02 / 14 / 2022
Transaction ID : VR08C12RT2Y8

Amount of Each Receipt this Period
 25.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Goren, Carolyn, , ,

Mailing Address PO Box 7189

City Missoula State MT Zip Code 59807-7189

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 ▼
 914.00

Date of Receipt
 02 / 14 / 2022
Transaction ID : VR08C12RT2Z5

Amount of Each Receipt this Period
 35.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Goren, Carolyn, , ,

Mailing Address PO Box 7189

City Missoula State MT Zip Code 59807-7189

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 ▼
 914.00

Date of Receipt
 02 / 14 / 2022
Transaction ID : VR08C12RT303

Amount of Each Receipt this Period
 15.00

Memo Item

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 82 OF 171
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Goren, Carolyn, , ,

Mailing Address PO Box 7189

City Missoula State MT Zip Code 59807-7189

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 ▼
 914.00

Date of Receipt
 02 / 14 / 2022
Transaction ID : VR08C12RT311

Amount of Each Receipt this Period
 25.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Goren, Carolyn, , ,

Mailing Address PO Box 7189

City Missoula State MT Zip Code 59807-7189

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 ▼
 914.00

Date of Receipt
 02 / 14 / 2022
Transaction ID : VR08C12RTRX7

Amount of Each Receipt this Period
 20.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Goren, Carolyn, , ,

Mailing Address PO Box 7189

City Missoula State MT Zip Code 59807-7189

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 ▼
 914.00

Date of Receipt
 02 / 21 / 2022
Transaction ID : VR08C12RZE63

Amount of Each Receipt this Period
 5.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 50.00

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 83 OF 171
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Goren, Carolyn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 7189
 City Missoula State MT Zip Code 59807-7189
 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 ▼ 914.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12RZFB5
 Amount of Each Receipt this Period
 15.00
 Memo Item

B. Goren, Carolyn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 7189
 City Missoula State MT Zip Code 59807-7189
 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 ▼ 914.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12RZWV9
 Amount of Each Receipt this Period
 17.00
 Memo Item

C. Goren, Carolyn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 7189
 City Missoula State MT Zip Code 59807-7189
 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 ▼ 914.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12S0H68
 Amount of Each Receipt this Period
 30.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	62.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 171
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Goren, Carolyn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 7189
 City Missoula State MT Zip Code 59807-7189
 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 ▼ 914.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12S0T16
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. Goren, Carolyn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 7189
 City Missoula State MT Zip Code 59807-7189
 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 ▼ 914.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12S14D3
 Amount of Each Receipt this Period
 15.00
 Memo Item

C. Goren, Carolyn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 7189
 City Missoula State MT Zip Code 59807-7189
 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 ▼ 914.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2022
Transaction ID : VR08C12SPZE4
 Amount of Each Receipt this Period
 3.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	43.00
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 85 OF 171
(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)
Congressional Progressive Caucus PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Goren, Carolyn, , ,

Mailing Address PO Box 7189

City Missoula State MT Zip Code 59807-7189

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 ▼
 914.00

Date of Receipt
 02 / 27 / 2022
Transaction ID : VR08C12SQ1V2

Amount of Each Receipt this Period
 4.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Goren, Carolyn, , ,

Mailing Address PO Box 7189

City Missoula State MT Zip Code 59807-7189

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 ▼
 914.00

Date of Receipt
 02 / 27 / 2022
Transaction ID : VR08C12SQ2G6

Amount of Each Receipt this Period
 6.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Goren, Carolyn, , ,

Mailing Address PO Box 7189

City Missoula State MT Zip Code 59807-7189

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 ▼
 914.00

Date of Receipt
 02 / 27 / 2022
Transaction ID : VR08C12SQ6F7

Amount of Each Receipt this Period
 5.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 15.00

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 86 OF 171
(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)
Congressional Progressive Caucus PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Goren, Carolyn, , ,

Mailing Address PO Box 7189

City Missoula State MT Zip Code 59807-7189

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 ▼ **914.00**

Date of Receipt **02 / 27 / 2022**

Transaction ID : VR08C12SR8Q2

Amount of Each Receipt this Period **5.00**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Goren, Carolyn, , ,

Mailing Address PO Box 7189

City Missoula State MT Zip Code 59807-7189

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 ▼ **914.00**

Date of Receipt **02 / 28 / 2022**

Transaction ID : VR08C12SSB63

Amount of Each Receipt this Period **25.00**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Goren, Carolyn, , ,

Mailing Address PO Box 7189

City Missoula State MT Zip Code 59807-7189

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 ▼ **914.00**

Date of Receipt **02 / 28 / 2022**

Transaction ID : VR08C12SSB71

Amount of Each Receipt this Period **5.00**

Memo Item

SUBTOTAL of Receipts This Page (optional)..... **35.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 171
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Hadley, Virginia, , ,

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

Mailing Address 405 Edison St SE

City Olympia	State WA	Zip Code 98501-1820
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Hirsch Center Integrative Medicine	Occupation (for Individual) Registered Nurse
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
229.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		07		2022

Transaction ID : VR08C12R8V38

Amount of Each Receipt this Period
5.00

Memo Item

B. Hadley, Virginia, , ,

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

Mailing Address 405 Edison St SE

City Olympia	State WA	Zip Code 98501-1820
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Hirsch Center Integrative Medicine	Occupation (for Individual) Registered Nurse
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
229.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		07		2022

Transaction ID : VR08C12R9GE9

Amount of Each Receipt this Period
15.00

Memo Item

C. Hadley, Virginia, , ,

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

Mailing Address 405 Edison St SE

City Olympia	State WA	Zip Code 98501-1820
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Hirsch Center Integrative Medicine	Occupation (for Individual) Registered Nurse
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
229.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		07		2022

Transaction ID : VR08C12RA8F7

Amount of Each Receipt this Period
5.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	25.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 171
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Hadley, Virginia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 405 Edison St SE
 City Olympia State WA Zip Code 98501-1820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hirsch Center Integrative Medicine Occupation (for Individual) Registered Nurse
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 229.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RRY38
 Amount of Each Receipt this Period
 3.00
 Memo Item

B. Hadley, Virginia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 405 Edison St SE
 City Olympia State WA Zip Code 98501-1820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hirsch Center Integrative Medicine Occupation (for Individual) Registered Nurse
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 229.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RSG78
 Amount of Each Receipt this Period
 5.00
 Memo Item

C. Hadley, Virginia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 405 Edison St SE
 City Olympia State WA Zip Code 98501-1820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hirsch Center Integrative Medicine Occupation (for Individual) Registered Nurse
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 229.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RSYF2
 Amount of Each Receipt this Period
 15.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	23.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 171
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Hadley, Virginia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 405 Edison St SE
 City Olympia State WA Zip Code 98501-1820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hirsch Center Integrative Medicine Occupation (for Individual) Registered Nurse
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 229.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RT8P7
 Amount of Each Receipt this Period
 5.00
 Memo Item

B. Hadley, Virginia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 405 Edison St SE
 City Olympia State WA Zip Code 98501-1820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hirsch Center Integrative Medicine Occupation (for Individual) Registered Nurse
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 229.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RTAH3
 Amount of Each Receipt this Period
 15.00
 Memo Item

C. Hadley, Virginia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 405 Edison St SE
 City Olympia State WA Zip Code 98501-1820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hirsch Center Integrative Medicine Occupation (for Individual) Registered Nurse
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 229.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RTAJ1
 Amount of Each Receipt this Period
 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	30.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 171
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Hadley, Virginia, , ,

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

Mailing Address 405 Edison St SE

City Olympia	State WA	Zip Code 98501-1820
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Hirsch Center Integrative Medicine	Occupation (for Individual) Registered Nurse
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
229.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	21	/	2022

Transaction ID : VR08C12RZSA8

Amount of Each Receipt this Period
5.00

Memo Item

B. Hadley, Virginia, , ,

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

Mailing Address 405 Edison St SE

City Olympia	State WA	Zip Code 98501-1820
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Hirsch Center Integrative Medicine	Occupation (for Individual) Registered Nurse
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
229.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	21	/	2022

Transaction ID : VR08C12S0D35

Amount of Each Receipt this Period
3.00

Memo Item

C. Hadley, Virginia, , ,

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

Mailing Address 405 Edison St SE

City Olympia	State WA	Zip Code 98501-1820
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Hirsch Center Integrative Medicine	Occupation (for Individual) Registered Nurse
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
229.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	21	/	2022

Transaction ID : VR08C12S0EA3

Amount of Each Receipt this Period
5.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	13.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 171
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Hadley, Virginia, , ,

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

Mailing Address 405 Edison St SE

City Olympia	State WA	Zip Code 98501-1820
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Hirsch Center Integrative Medicine	Occupation (for Individual) Registered Nurse
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
229.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		21		2022

Transaction ID : VR08C12S1AY0

Amount of Each Receipt this Period
3.00

Memo Item

B. Hadley, Virginia, , ,

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

Mailing Address 405 Edison St SE

City Olympia	State WA	Zip Code 98501-1820
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Hirsch Center Integrative Medicine	Occupation (for Individual) Registered Nurse
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
229.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2022

Transaction ID : VR08C12SR0P9

Amount of Each Receipt this Period
5.00

Memo Item

C. Hadley, Virginia, , ,

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

Mailing Address 405 Edison St SE

City Olympia	State WA	Zip Code 98501-1820
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Hirsch Center Integrative Medicine	Occupation (for Individual) Registered Nurse
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
229.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2022

Transaction ID : VR08C12SR9C8

Amount of Each Receipt this Period
5.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	13.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 92 OF 171
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Hadley, Virginia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 405 Edison St SE
 City Olympia State WA Zip Code 98501-1820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hirsch Center Integrative Medicine Occupation (for Individual) Registered Nurse
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 229.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2022
Transaction ID : VR08C12SRX07
 Amount of Each Receipt this Period
 3.00
 Memo Item

B. Hadley, Virginia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 405 Edison St SE
 City Olympia State WA Zip Code 98501-1820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hirsch Center Integrative Medicine Occupation (for Individual) Registered Nurse
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 229.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2022
Transaction ID : VR08C12SS6D8
 Amount of Each Receipt this Period
 5.00
 Memo Item

C. Haering, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5855 Cartago Dr
 City Lansing State MI Zip Code 48911-6497
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12RACR8
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	108.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 171
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Haering, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5855 Cartago Dr
 City Lansing State MI Zip Code 48911-6497
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RSSP6
 Amount of Each Receipt this Period 5.00
 Memo Item

B. Haering, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5855 Cartago Dr
 City Lansing State MI Zip Code 48911-6497
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2022
Transaction ID : VR08C12SS231
 Amount of Each Receipt this Period 35.00
 Memo Item

C. Hunsaker, Patricia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 215 Country Club Ln
 City Belleville State IL Zip Code 62223-1909
 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 ▼ 1516.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RS908
 Amount of Each Receipt this Period 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	45.00
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 94 OF 171
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Hunsaker, Patricia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 215 Country Club Ln
 City Belleville State IL Zip Code 62223-1909
 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 ▼ 1516.00

Date of Receipt 02 / 14 / 2022
Transaction ID : VR08C12RV0W7
 Amount of Each Receipt this Period 3.00
 Memo Item

B. Joost, Dawn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9329 Cypress Bend Dr
 City Tampa State FL Zip Code 33647-2553
 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 ▼ 391.50

Date of Receipt 02 / 07 / 2022
Transaction ID : VR08C12R9FR5
 Amount of Each Receipt this Period 10.00
 Memo Item

C. Joost, Dawn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9329 Cypress Bend Dr
 City Tampa State FL Zip Code 33647-2553
 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 ▼ 391.50

Date of Receipt 02 / 14 / 2022
Transaction ID : VR08C12RRX28
 Amount of Each Receipt this Period 11.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 24.00
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 95 OF 171
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Joost, Dawn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9329 Cypress Bend Dr
 City Tampa State FL Zip Code 33647-2553
 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 ▼ 391.50

Date of Receipt 02 / 14 / 2022
Transaction ID : VR08C12RSDY4
 Amount of Each Receipt this Period 20.00
 Memo Item

B. Joost, Dawn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9329 Cypress Bend Dr
 City Tampa State FL Zip Code 33647-2553
 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 ▼ 391.50

Date of Receipt 02 / 14 / 2022
Transaction ID : VR08C12RTFB6
 Amount of Each Receipt this Period 6.00
 Memo Item

C. Joost, Dawn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9329 Cypress Bend Dr
 City Tampa State FL Zip Code 33647-2553
 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 ▼ 391.50

Date of Receipt 02 / 21 / 2022
Transaction ID : VR08C12RZB82
 Amount of Each Receipt this Period 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	31.00
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 96 OF 171
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Joost, Dawn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9329 Cypress Bend Dr
 City Tampa State FL Zip Code 33647-2553
 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 ▼ 391.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12RZNK1
 Amount of Each Receipt this Period
 8.50
 Memo Item

B. Joost, Dawn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9329 Cypress Bend Dr
 City Tampa State FL Zip Code 33647-2553
 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 ▼ 391.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12S00Q4
 Amount of Each Receipt this Period
 11.00
 Memo Item

C. Joost, Dawn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9329 Cypress Bend Dr
 City Tampa State FL Zip Code 33647-2553
 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 ▼ 391.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12S0XD7
 Amount of Each Receipt this Period
 15.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	34.50
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 97 OF 171
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Joost, Dawn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9329 Cypress Bend Dr
 City Tampa State FL Zip Code 33647-2553
 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 ▼ 391.50

Date of Receipt 02 / 21 / 2022
Transaction ID : VR08C12S1GZ1
 Amount of Each Receipt this Period 15.00
 Memo Item

B. Kinahan, Consuelo, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4720 Fiore Bella Blvd
 City Las Vegas State NV Zip Code 89135-2493
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Care Now Urgent Care Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 333.00

Date of Receipt 02 / 21 / 2022
Transaction ID : VR08C12RZQP7
 Amount of Each Receipt this Period 15.00
 Memo Item

C. Kinahan, Consuelo, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4720 Fiore Bella Blvd
 City Las Vegas State NV Zip Code 89135-2493
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Care Now Urgent Care Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 333.00

Date of Receipt 02 / 27 / 2022
Transaction ID : VR08C12SQZ60
 Amount of Each Receipt this Period 15.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 45.00
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 98 OF 171
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Kinahan, Consuelo, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4720 Fiore Bella Blvd
 City Las Vegas State NV Zip Code 89135-2493
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Care Now Urgent Care Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 333.00

Date of Receipt **02 / 27 / 2022**
Transaction ID : VR08C12SR587
 Amount of Each Receipt this Period 300.00
 Memo Item

B. Kinahan, Consuelo, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4720 Fiore Bella Blvd
 City Las Vegas State NV Zip Code 89135-2493
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Care Now Urgent Care Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 333.00

Date of Receipt **02 / 27 / 2022**
Transaction ID : VR08C12SR595
 Amount of Each Receipt this Period 3.00
 Memo Item

C. Kinsella, Charlotte, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 135 Tokeneke Dr
 City North Haven State CT Zip Code 06473-4367
 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 ▼ 285.35

Date of Receipt **02 / 21 / 2022**
Transaction ID : VR08C12RZHC6
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	323.00
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 99 OF 171
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Kinsella, Charlotte, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 135 Tokeneke Dr
 City North Haven State CT Zip Code 06473-4367
 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 ▼ 285.35

Date of Receipt 02 / 21 / 2022
Transaction ID : VR08C12RZTY7
 Amount of Each Receipt this Period 15.00
 Memo Item

B. Kinsella, Charlotte, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 135 Tokeneke Dr
 City North Haven State CT Zip Code 06473-4367
 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 ▼ 285.35

Date of Receipt 02 / 27 / 2022
Transaction ID : VR08C12SRVH6
 Amount of Each Receipt this Period 19.00
 Memo Item

C. Kinsella, Charlotte, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 135 Tokeneke Dr
 City North Haven State CT Zip Code 06473-4367
 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 ▼ 285.35

Date of Receipt 02 / 28 / 2022
Transaction ID : VR08C12SS2H1
 Amount of Each Receipt this Period 15.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 49.00
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 100 OF 171
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Kinsella, Charlotte, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 135 Tokeneke Dr
 City North Haven State CT Zip Code 06473-4367
 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 ▼ 285.35

Date of Receipt 02 / 28 / 2022
Transaction ID : VR08C12SSCQ0
 Amount of Each Receipt this Period 35.00
 Memo Item

B. Mader, Barbara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 834
 City Alto State NM Zip Code 88312-0834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Registered Nurse
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 588.00

Date of Receipt 02 / 07 / 2022
Transaction ID : VR08C12R8WY3
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Mader, Barbara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 834
 City Alto State NM Zip Code 88312-0834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Registered Nurse
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 588.00

Date of Receipt 02 / 07 / 2022
Transaction ID : VR08C12R90F3
 Amount of Each Receipt this Period 15.00
 Memo Item

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 101 OF 171 (check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Mader, Barbara, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 834

City Alto	State NM	Zip Code 88312-0834
--------------	-------------	------------------------

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

Name of Employer (for Individual) Self-Employed	Occupation (for Individual) Registered Nurse
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
588.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	07	/	2022

Transaction ID : VR08C12R9Q46

Amount of Each Receipt this Period
35.00

Memo Item

B. Mader, Barbara, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 834

City Alto	State NM	Zip Code 88312-0834
--------------	-------------	------------------------

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

Name of Employer (for Individual) Self-Employed	Occupation (for Individual) Registered Nurse
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
588.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	07	/	2022

Transaction ID : VR08C12RA4A2

Amount of Each Receipt this Period
15.00

Memo Item

C. Mader, Barbara, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 834

City Alto	State NM	Zip Code 88312-0834
--------------	-------------	------------------------

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

Name of Employer (for Individual) Self-Employed	Occupation (for Individual) Registered Nurse
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
588.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	14	/	2022

Transaction ID : VR08C12RSQC4

Amount of Each Receipt this Period
15.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	65.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 102 OF 171
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Mader, Barbara, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 834

City Alto	State NM	Zip Code 88312-0834
--------------	-------------	------------------------

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

Name of Employer (for Individual) Self-Employed	Occupation (for Individual) Registered Nurse
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
588.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	14	/	2022

Transaction ID : VR08C12RSWE8

Amount of Each Receipt this Period
15.00

Memo Item

B. Mader, Barbara, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 834

City Alto	State NM	Zip Code 88312-0834
--------------	-------------	------------------------

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

Name of Employer (for Individual) Self-Employed	Occupation (for Individual) Registered Nurse
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
588.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	21	/	2022

Transaction ID : VR08C12S1EX1

Amount of Each Receipt this Period
25.00

Memo Item

C. Mader, Barbara, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 834

City Alto	State NM	Zip Code 88312-0834
--------------	-------------	------------------------

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

Name of Employer (for Individual) Self-Employed	Occupation (for Individual) Registered Nurse
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
588.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2022

Transaction ID : VR08C12SQ4E6

Amount of Each Receipt this Period
3.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	43.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 171
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Mader, Barbara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 834
 City Alto State NM Zip Code 88312-0834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Registered Nurse
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 588.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2022
Transaction ID : VR08C12SQA07
 Amount of Each Receipt this Period
 15.00
 Memo Item

B. Mader, Barbara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 834
 City Alto State NM Zip Code 88312-0834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Registered Nurse
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 588.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2022
Transaction ID : VR08C12SR7W9
 Amount of Each Receipt this Period
 300.00
 Memo Item

C. Mader, Barbara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 834
 City Alto State NM Zip Code 88312-0834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Registered Nurse
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 588.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2022
Transaction ID : VR08C12SRDS8
 Amount of Each Receipt this Period
 15.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	330.00
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 104 OF 171
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Mader, Barbara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 834
 City Alto State NM Zip Code 88312-0834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Registered Nurse
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 588.00

Date of Receipt 02 / 28 / 2022
Transaction ID : VR08C12SSBT1
 Amount of Each Receipt this Period 15.00
 Memo Item

B. Melcher, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6779 Treeline PI
 City Rancho Cucamonga State CA Zip Code 91701-5160
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) John Melcher AIA / Architect Occupation (for Individual) Architect
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 315.00

Date of Receipt 02 / 21 / 2022
Transaction ID : VR08C12RZ9Z0
 Amount of Each Receipt this Period 300.00
 Memo Item

C. Melcher, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6779 Treeline PI
 City Rancho Cucamonga State CA Zip Code 91701-5160
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) John Melcher AIA / Architect Occupation (for Individual) Architect
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 315.00

Date of Receipt 02 / 21 / 2022
Transaction ID : VR08C12RZWH0
 Amount of Each Receipt this Period 3.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 318.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 171
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Melcher, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6779 Treeline PI
 City Rancho Cucamonga State CA Zip Code 91701-5160
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) John Melcher AIA / Architect Occupation (for Individual) Architect
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12S0WZ7
 Amount of Each Receipt this Period
 3.00
 Memo Item

B. Melcher, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6779 Treeline PI
 City Rancho Cucamonga State CA Zip Code 91701-5160
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) John Melcher AIA / Architect Occupation (for Individual) Architect
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12S15C8
 Amount of Each Receipt this Period
 3.00
 Memo Item

C. Melcher, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6779 Treeline PI
 City Rancho Cucamonga State CA Zip Code 91701-5160
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) John Melcher AIA / Architect Occupation (for Individual) Architect
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2022
Transaction ID : VR08C12SRDG9
 Amount of Each Receipt this Period
 3.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	9.00
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 106 OF 171
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Melcher, John, , ,

Mailing Address 6779 Treeline Pl

City Rancho Cucamonga	State CA	Zip Code 91701-5160
--------------------------	-------------	------------------------

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

Name of Employer (for Individual) John Melcher AIA / Architect	Occupation (for Individual) Architect
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 315.00

Date of Receipt
 02 / 27 / 2022
Transaction ID : VR08C12SRKT1

Amount of Each Receipt this Period
 3.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Murphy, Brooke, , ,

Mailing Address 1225 Glenbrook Ter

City Nichols Hills	State OK	Zip Code 73116-5701
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) Crowe & Dunlevy	Occupation (for Individual) Attorney
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 266.50

Date of Receipt
 02 / 21 / 2022
Transaction ID : VR08C12RZDV6

Amount of Each Receipt this Period
 15.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Murphy, Brooke, , ,

Mailing Address 1225 Glenbrook Ter

City Nichols Hills	State OK	Zip Code 73116-5701
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) Crowe & Dunlevy	Occupation (for Individual) Attorney
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 266.50

Date of Receipt
 02 / 21 / 2022
Transaction ID : VR08C12RZQQ5

Amount of Each Receipt this Period
 16.50

Memo Item

SUBTOTAL of Receipts This Page (optional).....	34.50
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 107 OF 171
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Murphy, Brooke, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1225 Glenbrook Ter
 City Nichols Hills State OK Zip Code 73116-5701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Crowe & Dunlevy Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 266.50

Date of Receipt 02 / 21 / 2022
Transaction ID : VR08C12RZVYO
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Murphy, Brooke, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1225 Glenbrook Ter
 City Nichols Hills State OK Zip Code 73116-5701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Crowe & Dunlevy Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 266.50

Date of Receipt 02 / 21 / 2022
Transaction ID : VR08C12S0CT6
 Amount of Each Receipt this Period 15.00
 Memo Item

C. Murphy, Brooke, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1225 Glenbrook Ter
 City Nichols Hills State OK Zip Code 73116-5701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Crowe & Dunlevy Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 266.50

Date of Receipt 02 / 21 / 2022
Transaction ID : VR08C12S0CV3
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 100.00
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 108 OF 171
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Murphy, Brooke, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1225 Glenbrook Ter
 City Nichols Hills State OK Zip Code 73116-5701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Crowe & Dunlevy Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 266.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2022
Transaction ID : VR08C12SQZ77
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. Murphy, Brooke, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1225 Glenbrook Ter
 City Nichols Hills State OK Zip Code 73116-5701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Crowe & Dunlevy Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 266.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2022
Transaction ID : VR08C12SR5E5
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. Murphy, Brooke, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1225 Glenbrook Ter
 City Nichols Hills State OK Zip Code 73116-5701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Crowe & Dunlevy Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 266.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2022
Transaction ID : VR08C12SR5F2
 Amount of Each Receipt this Period
 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	135.00
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 109 OF 171
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Nicholes, Linda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6261 E Fox Glen Dr
 City Anaheim State CA Zip Code 92807-4070
 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 ▼ 217.50

Date of Receipt 02 / 27 / 2022
Transaction ID : VR08C12SPX59
 Amount of Each Receipt this Period 32.50
 Memo Item

B. Nicholes, Linda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6261 E Fox Glen Dr
 City Anaheim State CA Zip Code 92807-4070
 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 ▼ 217.50

Date of Receipt 02 / 27 / 2022
Transaction ID : VR08C12SQDM2
 Amount of Each Receipt this Period 70.00
 Memo Item

C. Nicholes, Linda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6261 E Fox Glen Dr
 City Anaheim State CA Zip Code 92807-4070
 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 ▼ 217.50

Date of Receipt 02 / 27 / 2022
Transaction ID : VR08C12SRKX4
 Amount of Each Receipt this Period 30.00
 Memo Item

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

132.50

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

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

FOR LINE NUMBER: PAGE 110 OF 171
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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Ninde, William, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28 Kingswood Dr
 City Pittsburg State CA Zip Code 94565-5770
 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 ▼ 208.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12R8X24
 Amount of Each Receipt this Period
 17.00
 Memo Item

B. Ninde, William, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28 Kingswood Dr
 City Pittsburg State CA Zip Code 94565-5770
 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 ▼ 208.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RSB37
 Amount of Each Receipt this Period
 5.00
 Memo Item

C. Ninde, William, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28 Kingswood Dr
 City Pittsburg State CA Zip Code 94565-5770
 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 ▼ 208.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12RZJH9
 Amount of Each Receipt this Period
 17.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 39.00
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 111 OF 171
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Ninde, William, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28 Kingswood Dr
 City Pittsburg State CA Zip Code 94565-5770
 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 ▼ 208.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2022
Transaction ID : VR08C12SR9P7
 Amount of Each Receipt this Period 15.00
 Memo Item

B. Ninde, William, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28 Kingswood Dr
 City Pittsburg State CA Zip Code 94565-5770
 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 ▼ 208.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2022
Transaction ID : VR08C12SRD10
 Amount of Each Receipt this Period 15.00
 Memo Item

C. Ninde, William, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28 Kingswood Dr
 City Pittsburg State CA Zip Code 94565-5770
 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 ▼ 208.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2022
Transaction ID : VR08C12SRWS2
 Amount of Each Receipt this Period 15.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 45.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 112 OF 171
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Owen, Sharon, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2273 S Syene Rd
 City Fitchburg State WI Zip Code 53711-5638
 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 ▼ 368.00

Date of Receipt **02 / 07 / 2022**
Transaction ID : VR08C12R9TK1
 Amount of Each Receipt this Period 15.00
 Memo Item

B. Owen, Sharon, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2273 S Syene Rd
 City Fitchburg State WI Zip Code 53711-5638
 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 ▼ 368.00

Date of Receipt **02 / 14 / 2022**
Transaction ID : VR08C12RSCS1
 Amount of Each Receipt this Period 3.00
 Memo Item

C. Owen, Sharon, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2273 S Syene Rd
 City Fitchburg State WI Zip Code 53711-5638
 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 ▼ 368.00

Date of Receipt **02 / 27 / 2022**
Transaction ID : VR08C12SRP35
 Amount of Each Receipt this Period 300.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	318.00
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

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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Owen, Sharon, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2273 S Syene Rd
 City Fitchburg State WI Zip Code 53711-5638
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 N/A Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 368.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2022
Transaction ID : VR08C12SRP43
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. Perret, Charlotte, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 707 S Gulfstream Ave
 City Sarasota State FL Zip Code 34236-7710
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 N/A Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12RZKW8
 Amount of Each Receipt this Period
 85.00
 Memo Item

C. Perret, Charlotte, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 707 S Gulfstream Ave
 City Sarasota State FL Zip Code 34236-7710
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 N/A Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12S02X7
 Amount of Each Receipt this Period
 85.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 220.00
TOTAL This Period (last page this line number only)..... ▶

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

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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Perret, Charlotte, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 707 S Gulfstream Ave
 City Sarasota State FL Zip Code 34236-7710
 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 ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12S0RH9
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. Riley, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26 Church St
 City Pittsford State NY Zip Code 14534-2006
 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 ▼ 334.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12R9DA1
 Amount of Each Receipt this Period
 3.00
 Memo Item

C. Riley, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26 Church St
 City Pittsford State NY Zip Code 14534-2006
 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 ▼ 334.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12R9DB9
 Amount of Each Receipt this Period
 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 58.00
TOTAL This Period (last page this line number only)..... ▶

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

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FOR LINE NUMBER: PAGE 115 OF 171
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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Riley, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26 Church St
 City Pittsford State NY Zip Code 14534-2006
 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 ▼ 334.00

Date of Receipt 02 / 07 / 2022
Transaction ID : VR08C12RA0Q5
 Amount of Each Receipt this Period 300.00
 Memo Item

B. Riley, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26 Church St
 City Pittsford State NY Zip Code 14534-2006
 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 ▼ 334.00

Date of Receipt 02 / 07 / 2022
Transaction ID : VR08C12RA0R3
 Amount of Each Receipt this Period 3.00
 Memo Item

C. Riley, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26 Church St
 City Pittsford State NY Zip Code 14534-2006
 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 ▼ 334.00

Date of Receipt 02 / 14 / 2022
Transaction ID : VR08C12RSV65
 Amount of Each Receipt this Period 3.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 306.00
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

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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Simons, Jacqueline, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2060 Las Canoas Ridge Way
 City Santa Barbara State CA Zip Code 93105-2379
 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 ▼ 374.50

Date of Receipt 02 / 07 / 2022
Transaction ID : VR08C12R9461
 Amount of Each Receipt this Period 12.50
 Memo Item

B. Simons, Jacqueline, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2060 Las Canoas Ridge Way
 City Santa Barbara State CA Zip Code 93105-2379
 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 ▼ 374.50

Date of Receipt 02 / 07 / 2022
Transaction ID : VR08C12R9BM5
 Amount of Each Receipt this Period 15.00
 Memo Item

C. Simons, Jacqueline, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2060 Las Canoas Ridge Way
 City Santa Barbara State CA Zip Code 93105-2379
 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 ▼ 374.50

Date of Receipt 02 / 07 / 2022
Transaction ID : VR08C12RA614
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 62.50
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

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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Simons, Jacqueline, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2060 Las Canoas Ridge Way
 City Santa Barbara State CA Zip Code 93105-2379
 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 ▼ 374.50

Date of Receipt 02 / 14 / 2022
Transaction ID : VR08C12RSHZ1
 Amount of Each Receipt this Period 9.50
 Memo Item

B. Simons, Jacqueline, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2060 Las Canoas Ridge Way
 City Santa Barbara State CA Zip Code 93105-2379
 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 ▼ 374.50

Date of Receipt 02 / 14 / 2022
Transaction ID : VR08C12RTXC4
 Amount of Each Receipt this Period 15.00
 Memo Item

C. Simons, Jacqueline, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2060 Las Canoas Ridge Way
 City Santa Barbara State CA Zip Code 93105-2379
 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 ▼ 374.50

Date of Receipt 02 / 21 / 2022
Transaction ID : VR08C12RZWK5
 Amount of Each Receipt this Period 15.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 39.50
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 118 OF 171
(check only one)
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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Simons, Jacqueline, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2060 Las Canoas Ridge Way
 City Santa Barbara State CA Zip Code 93105-2379
 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 ▼ 374.50

Date of Receipt 02 / 21 / 2022
Transaction ID : VR08C12S12X4
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Simons, Jacqueline, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2060 Las Canoas Ridge Way
 City Santa Barbara State CA Zip Code 93105-2379
 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 ▼ 374.50

Date of Receipt 02 / 27 / 2022
Transaction ID : VR08C12SQT36
 Amount of Each Receipt this Period 19.00
 Memo Item

C. Simons, Jacqueline, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2060 Las Canoas Ridge Way
 City Santa Barbara State CA Zip Code 93105-2379
 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 ▼ 374.50

Date of Receipt 02 / 27 / 2022
Transaction ID : VR08C12SRDD5
 Amount of Each Receipt this Period 15.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 84.00
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 119 OF 171
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<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Simons, Jacqueline, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2060 Las Canoas Ridge Way
 City Santa Barbara State CA Zip Code 93105-2379
 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 ▼ 374.50

Date of Receipt 02 / 28 / 2022
Transaction ID : VR08C12SS7Z1
 Amount of Each Receipt this Period 19.00
 Memo Item

B. Sochet, Mary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 380 Riverside Dr
 City New York State NY Zip Code 10025-1858
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Author/Activist/Educator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ - 89.00

Date of Receipt 02 / 14 / 2022
Transaction ID : VR08C12RSA26
 Amount of Each Receipt this Period 21.00
 Memo Item

C. Sochet, Mary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 380 Riverside Dr
 City New York State NY Zip Code 10025-1858
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Author/Activist/Educator
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ - 89.00

Date of Receipt 02 / 14 / 2022
Transaction ID : VR08C12RSAC5
 Amount of Each Receipt this Period 21.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	61.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 120 OF 171
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Sochet, Mary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 380 Riverside Dr
 City New York State NY Zip Code 10025-1858
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Author/Activist/Educator
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **- 89.00**

Date of Receipt **02 / 14 / 2022**
Transaction ID : VR08C12RTA74
 Amount of Each Receipt this Period **70.00**
 Memo Item

B. Sochet, Mary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 380 Riverside Dr
 City New York State NY Zip Code 10025-1858
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Author/Activist/Educator
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **- 89.00**

Date of Receipt **02 / 14 / 2022**
Transaction ID : VR08C12RTA82
 Amount of Each Receipt this Period **35.00**
 Memo Item

C. Sochet, Mary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 380 Riverside Dr
 City New York State NY Zip Code 10025-1858
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Author/Activist/Educator
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **- 89.00**

Date of Receipt **02 / 21 / 2022**
Transaction ID : VR08C12S10J3
 Amount of Each Receipt this Period **3.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	108.00
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 121 OF 171
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Sochet, Mary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 380 Riverside Dr
 City New York State NY Zip Code 10025-1858
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Author/Activist/Educator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ - 89.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2022
Transaction ID : VR08C12SQ1Q1
 Amount of Each Receipt this Period
 15.00
 Memo Item

B. Sochet, Mary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 380 Riverside Dr
 City New York State NY Zip Code 10025-1858
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Author/Activist/Educator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ - 89.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2022
Transaction ID : VR08C12SRF06
 Amount of Each Receipt this Period
 41.00
 Memo Item

C. Sochet, Mary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 380 Riverside Dr
 City New York State NY Zip Code 10025-1858
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Author/Activist/Educator
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ - 89.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2022
Transaction ID : VR08C12SRFV9
 Amount of Each Receipt this Period
 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	61.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 122 OF 171
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Stobodzan, Diane, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 56 Broadway
 City Smithtown State NY Zip Code 11787-4602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2022
Transaction ID : VR08C12SR656
 Amount of Each Receipt this Period
 300.00
 Memo Item

B. Stowers, Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Mecca Ln
 City Derry State NH Zip Code 03038-4804
 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 ▼ 372.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12R8X66
 Amount of Each Receipt this Period
 8.00
 Memo Item

C. Stowers, Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Mecca Ln
 City Derry State NH Zip Code 03038-4804
 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 ▼ 372.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12R8XJ1
 Amount of Each Receipt this Period
 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	318.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 123 OF 171
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Stowers, Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Mecca Ln
 City Derry State NH Zip Code 03038-4804
 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 ▼ 372.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12R91V1
 Amount of Each Receipt this Period
 2.50
 Memo Item

B. Stowers, Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Mecca Ln
 City Derry State NH Zip Code 03038-4804
 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 ▼ 372.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12R9A14
 Amount of Each Receipt this Period
 5.00
 Memo Item

C. Stowers, Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Mecca Ln
 City Derry State NH Zip Code 03038-4804
 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 ▼ 372.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12R9D52
 Amount of Each Receipt this Period
 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	12.50
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 124 OF 171
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Stowers, Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Mecca Ln
 City Derry State NH Zip Code 03038-4804
 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 ▼ 372.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12R9D60
 Amount of Each Receipt this Period
 5.00
 Memo Item

B. Stowers, Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Mecca Ln
 City Derry State NH Zip Code 03038-4804
 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 ▼ 372.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12R9M49
 Amount of Each Receipt this Period
 2.50
 Memo Item

C. Stowers, Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Mecca Ln
 City Derry State NH Zip Code 03038-4804
 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 ▼ 372.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12R9XJ9
 Amount of Each Receipt this Period
 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 12.50
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 125 OF 171
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Stowers, Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Mecca Ln
 City Derry State NH Zip Code 03038-4804
 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 ▼ 372.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12R9YZ3
 Amount of Each Receipt this Period 8.00
 Memo Item

B. Stowers, Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Mecca Ln
 City Derry State NH Zip Code 03038-4804
 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 ▼ 372.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12RA503
 Amount of Each Receipt this Period 5.00
 Memo Item

C. Stowers, Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Mecca Ln
 City Derry State NH Zip Code 03038-4804
 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 ▼ 372.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12RA511
 Amount of Each Receipt this Period 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 18.00
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 126 OF 171
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Stowers, Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Mecca Ln
 City Derry State NH Zip Code 03038-4804
 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 ▼ 372.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12RA6W7
 Amount of Each Receipt this Period 5.00
 Memo Item

B. Stowers, Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Mecca Ln
 City Derry State NH Zip Code 03038-4804
 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 ▼ 372.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12RA6X5
 Amount of Each Receipt this Period 5.00
 Memo Item

C. Stowers, Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Mecca Ln
 City Derry State NH Zip Code 03038-4804
 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 ▼ 372.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RRTQ8
 Amount of Each Receipt this Period 2.50
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	12.50
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 127 OF 171		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Stowers, Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Mecca Ln
 City Derry State NH Zip Code 03038-4804
 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 ▼ 372.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RS1M9
 Amount of Each Receipt this Period
 10.00
 Memo Item

B. Stowers, Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Mecca Ln
 City Derry State NH Zip Code 03038-4804
 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 ▼ 372.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RS9C2
 Amount of Each Receipt this Period
 5.00
 Memo Item

C. Stowers, Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Mecca Ln
 City Derry State NH Zip Code 03038-4804
 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 ▼ 372.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RS9D0
 Amount of Each Receipt this Period
 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	20.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 128 OF 171
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Stowers, Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Mecca Ln
 City Derry State NH Zip Code 03038-4804
 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 ▼ 372.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RSAW2
 Amount of Each Receipt this Period
 5.00
 Memo Item

B. Stowers, Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Mecca Ln
 City Derry State NH Zip Code 03038-4804
 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 ▼ 372.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RSEB6
 Amount of Each Receipt this Period
 5.00
 Memo Item

C. Stowers, Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Mecca Ln
 City Derry State NH Zip Code 03038-4804
 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 ▼ 372.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RSGR3
 Amount of Each Receipt this Period
 2.50
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	12.50
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 129 OF 171
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Stowers, Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Mecca Ln
 City Derry State NH Zip Code 03038-4804
 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 ▼ 372.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RSNC8
 Amount of Each Receipt this Period 2.50
 Memo Item

B. Stowers, Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Mecca Ln
 City Derry State NH Zip Code 03038-4804
 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 ▼ 372.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RSQQ0
 Amount of Each Receipt this Period 5.00
 Memo Item

C. Stowers, Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Mecca Ln
 City Derry State NH Zip Code 03038-4804
 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 ▼ 372.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RSSM0
 Amount of Each Receipt this Period 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	12.50
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 130 OF 171
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Stowers, Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Mecca Ln
 City Derry State NH Zip Code 03038-4804
 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 ▼ 372.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RSY79
 Amount of Each Receipt this Period 5.00
 Memo Item

B. Stowers, Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Mecca Ln
 City Derry State NH Zip Code 03038-4804
 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 ▼ 372.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RT0S4
 Amount of Each Receipt this Period 5.00
 Memo Item

C. Stowers, Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Mecca Ln
 City Derry State NH Zip Code 03038-4804
 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 ▼ 372.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RT3Z8
 Amount of Each Receipt this Period 5.00
 Memo Item

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

15.00

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

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

FOR LINE NUMBER: PAGE 131 OF 171
(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)
Congressional Progressive Caucus PAC

A. Stowers, Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Mecca Ln
 City Derry State NH Zip Code 03038-4804
 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 ▼ 372.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RTMW0
 Amount of Each Receipt this Period 12.00
 Memo Item

B. Stowers, Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Mecca Ln
 City Derry State NH Zip Code 03038-4804
 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 ▼ 372.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RTMX8
 Amount of Each Receipt this Period 5.00
 Memo Item

C. Stowers, Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Mecca Ln
 City Derry State NH Zip Code 03038-4804
 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 ▼ 372.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RTMY6
 Amount of Each Receipt this Period 5.00
 Memo Item

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

22.00

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

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

FOR LINE NUMBER: PAGE 132 OF 171
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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Stowers, Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Mecca Ln
 City Derry State NH Zip Code 03038-4804
 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 ▼ 372.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RTMZ4
 Amount of Each Receipt this Period 3.00
 Memo Item

B. Stowers, Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Mecca Ln
 City Derry State NH Zip Code 03038-4804
 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 ▼ 372.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12RZDQ6
 Amount of Each Receipt this Period 5.00
 Memo Item

C. Stowers, Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Mecca Ln
 City Derry State NH Zip Code 03038-4804
 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 ▼ 372.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12RZGT6
 Amount of Each Receipt this Period 4.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 12.00
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 133 OF 171
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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Stowers, Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Mecca Ln
 City Derry State NH Zip Code 03038-4804
 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 ▼ 372.50

Date of Receipt
 02 / 21 / 2022
Transaction ID : VR08C12RZRG3
 Amount of Each Receipt this Period 5.00
 Memo Item

B. Stowers, Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Mecca Ln
 City Derry State NH Zip Code 03038-4804
 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 ▼ 372.50

Date of Receipt
 02 / 21 / 2022
Transaction ID : VR08C12RZRHO
 Amount of Each Receipt this Period 5.00
 Memo Item

C. Stowers, Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Mecca Ln
 City Derry State NH Zip Code 03038-4804
 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 ▼ 372.50

Date of Receipt
 02 / 21 / 2022
Transaction ID : VR08C12RZZC7
 Amount of Each Receipt this Period 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 15.00
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 134 OF 171
(check only one)
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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Stowers, Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Mecca Ln
 City Derry State NH Zip Code 03038-4804
 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 ▼ 372.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12RZZD4
 Amount of Each Receipt this Period
 2.50
 Memo Item

B. Stowers, Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Mecca Ln
 City Derry State NH Zip Code 03038-4804
 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 ▼ 372.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12S0121
 Amount of Each Receipt this Period
 5.00
 Memo Item

C. Stowers, Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Mecca Ln
 City Derry State NH Zip Code 03038-4804
 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 ▼ 372.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12S0139
 Amount of Each Receipt this Period
 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 12.50
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 135 OF 171
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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Stowers, Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Mecca Ln
 City Derry State NH Zip Code 03038-4804
 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 ▼ 372.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12S06E8
 Amount of Each Receipt this Period 5.00
 Memo Item

B. Stowers, Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Mecca Ln
 City Derry State NH Zip Code 03038-4804
 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 ▼ 372.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12S06F6
 Amount of Each Receipt this Period 5.00
 Memo Item

C. Stowers, Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Mecca Ln
 City Derry State NH Zip Code 03038-4804
 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 ▼ 372.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12S1146
 Amount of Each Receipt this Period 10.00
 Memo Item

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

20.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 136 OF 171
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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Stowers, Ellen, , ,

Mailing Address 5 Mecca Ln

City Derry State NH Zip Code 03038-4804

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 ▼
372.50

Date of Receipt
MM / DD / YYYY
02 / 21 / 2022
Transaction ID : VR08C12S1153

Amount of Each Receipt this Period
5.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Stowers, Ellen, , ,

Mailing Address 5 Mecca Ln

City Derry State NH Zip Code 03038-4804

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 ▼
372.50

Date of Receipt
MM / DD / YYYY
02 / 21 / 2022
Transaction ID : VR08C12S1161

Amount of Each Receipt this Period
3.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Stowers, Ellen, , ,

Mailing Address 5 Mecca Ln

City Derry State NH Zip Code 03038-4804

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 ▼
372.50

Date of Receipt
MM / DD / YYYY
02 / 21 / 2022
Transaction ID : VR08C12S18W1

Amount of Each Receipt this Period
5.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 13.00

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

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Stowers, Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Mecca Ln
 City Derry State NH Zip Code 03038-4804
 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 ▼ 372.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2022
Transaction ID : VR08C12SRQJ5
 Amount of Each Receipt this Period
 5.00
 Memo Item

B. Stowers, Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Mecca Ln
 City Derry State NH Zip Code 03038-4804
 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 ▼ 372.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2022
Transaction ID : VR08C12SRV85
 Amount of Each Receipt this Period
 4.00
 Memo Item

C. Van Dorn, Janet, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1310 NW Naito Pkwy
 City Portland State OR Zip Code 97209-3157
 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 ▼ 281.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12RZH19
 Amount of Each Receipt this Period
 125.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 134.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 138 OF 171
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Van Dorn, Janet, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1310 NW Naito Pkwy
 City Portland State OR Zip Code 97209-3157
 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 ▼ 281.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12RZZ35
 Amount of Each Receipt this Period
 62.50
 Memo Item

B. Van Dorn, Janet, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1310 NW Naito Pkwy
 City Portland State OR Zip Code 97209-3157
 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 ▼ 281.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12RZZ43
 Amount of Each Receipt this Period
 94.00
 Memo Item

C. Vermeersch, Wave, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6845 Clark Rd
 City Unionville State MI Zip Code 48767-9449
 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 ▼ 427.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12R93W2
 Amount of Each Receipt this Period
 300.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	456.50
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 139 OF 171
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Vermeersch, Wave, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6845 Clark Rd
 City Unionville State MI Zip Code 48767-9449
 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 ▼ 427.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12R93X0
 Amount of Each Receipt this Period 2.50
 Memo Item

B. Vermeersch, Wave, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6845 Clark Rd
 City Unionville State MI Zip Code 48767-9449
 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 ▼ 427.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12R9596
 Amount of Each Receipt this Period 5.00
 Memo Item

C. Vermeersch, Wave, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6845 Clark Rd
 City Unionville State MI Zip Code 48767-9449
 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 ▼ 427.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12R9CT5
 Amount of Each Receipt this Period 2.50
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	10.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 140 OF 171
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Vermeersch, Wave, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6845 Clark Rd
 City Unionville State MI Zip Code 48767-9449
 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 ▼ 427.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12R9PH6
 Amount of Each Receipt this Period
 5.00
 Memo Item

B. Vermeersch, Wave, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6845 Clark Rd
 City Unionville State MI Zip Code 48767-9449
 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 ▼ 427.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12R9TG7
 Amount of Each Receipt this Period
 6.00
 Memo Item

C. Vermeersch, Wave, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6845 Clark Rd
 City Unionville State MI Zip Code 48767-9449
 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 ▼ 427.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RRVH4
 Amount of Each Receipt this Period
 3.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	14.00
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

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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Vermeersch, Wave, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6845 Clark Rd
 City Unionville State MI Zip Code 48767-9449
 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 ▼ 427.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RS388
 Amount of Each Receipt this Period 5.00
 Memo Item

B. Vermeersch, Wave, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6845 Clark Rd
 City Unionville State MI Zip Code 48767-9449
 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 ▼ 427.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RSHG2
 Amount of Each Receipt this Period 3.00
 Memo Item

C. Vermeersch, Wave, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6845 Clark Rd
 City Unionville State MI Zip Code 48767-9449
 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 ▼ 427.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RSP89
 Amount of Each Receipt this Period 5.00
 Memo Item

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

13.00

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

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

FOR LINE NUMBER: PAGE 142 OF 171
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Vermeersch, Wave, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6845 Clark Rd
 City Unionville State MI Zip Code 48767-9449
 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 ▼ 427.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2022
Transaction ID : VR08C12RT2A0
 Amount of Each Receipt this Period 6.00
 Memo Item

B. Vermeersch, Wave, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6845 Clark Rd
 City Unionville State MI Zip Code 48767-9449
 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 ▼ 427.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12RZNT6
 Amount of Each Receipt this Period 4.00
 Memo Item

C. Vermeersch, Wave, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6845 Clark Rd
 City Unionville State MI Zip Code 48767-9449
 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 ▼ 427.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2022
Transaction ID : VR08C12S02F7
 Amount of Each Receipt this Period 5.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 15.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 143 OF 171
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Vermeersch, Wave, , ,

Mailing Address 6845 Clark Rd

City Unionville	State MI	Zip Code 48767-9449
--------------------	-------------	------------------------

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 ▼
427.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	21	/	2022

Transaction ID : VR08C12S0H42

Amount of Each Receipt this Period
6.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Vermeersch, Wave, , ,

Mailing Address 6845 Clark Rd

City Unionville	State MI	Zip Code 48767-9449
--------------------	-------------	------------------------

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 ▼
427.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	21	/	2022

Transaction ID : VR08C12S0TP2

Amount of Each Receipt this Period
5.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Vermeersch, Wave, , ,

Mailing Address 6845 Clark Rd

City Unionville	State MI	Zip Code 48767-9449
--------------------	-------------	------------------------

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 ▼
427.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	21	/	2022

Transaction ID : VR08C12S0TQ0

Amount of Each Receipt this Period
5.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	16.00
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 144 OF 171
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Vermeersch, Wave, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6845 Clark Rd
 City Unionville State MI Zip Code 48767-9449
 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 ▼ 427.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2022
Transaction ID : VR08C12SQG50
 Amount of Each Receipt this Period 5.00
 Memo Item

B. Vermeersch, Wave, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6845 Clark Rd
 City Unionville State MI Zip Code 48767-9449
 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 ▼ 427.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2022
Transaction ID : VR08C12SR377
 Amount of Each Receipt this Period 5.00
 Memo Item

C. Vermeersch, Wave, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6845 Clark Rd
 City Unionville State MI Zip Code 48767-9449
 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 ▼ 427.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2022
Transaction ID : VR08C12SRP02
 Amount of Each Receipt this Period 7.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	17.00
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 145 OF 171
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Vick, Charlotte, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7512 Stepdown Cv
 City Austin State TX Zip Code 78731-1141
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Ocean Science Policy Conservation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 244.00

Date of Receipt 02 / 21 / 2022
Transaction ID : VR08C12RZA40
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Vick, Charlotte, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7512 Stepdown Cv
 City Austin State TX Zip Code 78731-1141
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Ocean Science Policy Conservation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 244.00

Date of Receipt 02 / 21 / 2022
Transaction ID : VR08C12RZQZ8
 Amount of Each Receipt this Period 15.00
 Memo Item

C. Vick, Charlotte, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7512 Stepdown Cv
 City Austin State TX Zip Code 78731-1141
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Ocean Science Policy Conservation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 244.00

Date of Receipt 02 / 21 / 2022
Transaction ID : VR08C12S0EP8
 Amount of Each Receipt this Period 70.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 185.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 146 OF 171
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Vick, Charlotte, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7512 Stepdown Cv
 City Austin State TX Zip Code 78731-1141
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Ocean Science Policy Conservation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 244.00

Date of Receipt **02 / 21 / 2022**
Transaction ID : VR08C12S0KK4
 Amount of Each Receipt this Period 59.00
 Memo Item

B. Weir Ancker, Susan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 133 Priest Canyon Rd
 City Lincoln State NM Zip Code 88338-8006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Teacher
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **02 / 14 / 2022**
Transaction ID : VR08C12RTVB0
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Weir Ancker, Susan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 133 Priest Canyon Rd
 City Lincoln State NM Zip Code 88338-8006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Teacher
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **02 / 27 / 2022**
Transaction ID : VR08C12SR6H1
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	184.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 147 OF 171
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Weir Ancker, Susan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 133 Priest Canyon Rd
 City Lincoln State NM Zip Code 88338-8006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Teacher
 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
 02 / 27 / 2022
Transaction ID : VR08C12SR6J9
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. Whitson, William, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1650 Spruce St
 City Berkeley State CA Zip Code 94709-1616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12R8SD2
 Amount of Each Receipt this Period
 15.00
 Memo Item

C. Whitson, William, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1650 Spruce St
 City Berkeley State CA Zip Code 94709-1616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 07 / 2022
Transaction ID : VR08C12RA671
 Amount of Each Receipt this Period
 15.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	80.00
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 148 OF 171
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Whitson, William, L, ,

Mailing Address 1650 Spruce St

City Berkeley State CA Zip Code 94709-1616

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **255.00**

Date of Receipt **02 / 14 / 2022**

Transaction ID : VR08C12RTK66

Amount of Each Receipt this Period **25.00**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Whitson, William, L, ,

Mailing Address 1650 Spruce St

City Berkeley State CA Zip Code 94709-1616

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **255.00**

Date of Receipt **02 / 21 / 2022**

Transaction ID : VR08C12S0QD5

Amount of Each Receipt this Period **25.00**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Whitson, William, L, ,

Mailing Address 1650 Spruce St

City Berkeley State CA Zip Code 94709-1616

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

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

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ **255.00**

Date of Receipt **02 / 21 / 2022**

Transaction ID : VR08C12S0WS9

Amount of Each Receipt this Period **35.00**

Memo Item

SUBTOTAL of Receipts This Page (optional)..... **85.00**

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 149 OF 171
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Whitson, William, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1650 Spruce St
 City Berkeley State CA Zip Code 94709-1616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 02 / 27 / 2022
Transaction ID : VR08C12SQDH8
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Whitson, William, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1650 Spruce St
 City Berkeley State CA Zip Code 94709-1616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 02 / 27 / 2022
Transaction ID : VR08C12SRCS7
 Amount of Each Receipt this Period 15.00
 Memo Item

C. Yee Hollis, Christine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1634 San Gabriel Ave
 City Glendale State CA Zip Code 91208-1734
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) City Of Los Angeles Occupation (for Individual) Legislative Analyst City Council
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 02 / 07 / 2022
Transaction ID : VR08C12R9742
 Amount of Each Receipt this Period 15.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 80.00
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 150 OF 171
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Yee Hollis, Christine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1634 San Gabriel Ave
 City Glendale State CA Zip Code 91208-1734
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) City Of Los Angeles Occupation (for Individual) Legislative Analyst City Council
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 02 / 14 / 2022
Transaction ID : VR08C12RSNF2
 Amount of Each Receipt this Period 15.00
 Memo Item

B. Yee Hollis, Christine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1634 San Gabriel Ave
 City Glendale State CA Zip Code 91208-1734
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) City Of Los Angeles Occupation (for Individual) Legislative Analyst City Council
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 02 / 21 / 2022
Transaction ID : VR08C12RZEX4
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Yee Hollis, Christine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1634 San Gabriel Ave
 City Glendale State CA Zip Code 91208-1734
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) City Of Los Angeles Occupation (for Individual) Legislative Analyst City Council
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 02 / 27 / 2022
Transaction ID : VR08C12SR5C9
 Amount of Each Receipt this Period 15.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.00
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 151 OF 171
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Yee Hollis, Christine, , ,

Mailing Address 1634 San Gabriel Ave

City Glendale State CA Zip Code 91208-1734

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

Name of Employer (for Individual) City Of Los Angeles Occupation (for Individual) Legislative Analyst City Council

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 27 / 2022

Transaction ID : VR08C12SRG58

Amount of Each Receipt this Period
 15.00

Memo Item

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

Mailing Address

City State Zip Code

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

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

Receipt For:
 Primary General
 Other (specify) ▼

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

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

Mailing Address

City State Zip Code

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

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

Receipt For:
 Primary General
 Other (specify)

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).....▶	15.00
TOTAL This Period (last page this line number only).....▶	8902.14

**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 152 OF 171
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. INDIVISIBLE ACTION

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

Mailing Address PO Box 43135

City Washington	State DC	Zip Code 20010-9135
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00678839

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	22	/	2022

Transaction ID : VR08C12TAVS1

Amount of Each Receipt this Period
5000.00

Memo Item

B.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
INT'L ASSOCIATION OF BRIDGE, STRUCTURAL, ORNAMENTAL AND REINFORCING IRON WORKERS (IPAL)

Mailing Address 1750 New York Ave NW
Ste 400

City Washington	State DC	Zip Code 20006-5315
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00027359

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	01	/	2022

Transaction ID : VR08C12QWAE4

Amount of Each Receipt this Period
5000.00

Memo Item

C. NARAL PRO-CHOICE AMERICA PAC

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

Mailing Address 1725 I St NW
Ste 900

City Washington	State DC	Zip Code 20006-2420
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00079541

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2022

Transaction ID : VR08C12T8V71

Amount of Each Receipt this Period
5000.00

Memo Item

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

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

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

FOR LINE NUMBER: PAGE 153 OF 171
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 NATIONAL ASSOCIATION OF LETTER CARRIERS OF U.S.A. POLITICAL FUND (LETTER CARRIER POLITICAL

Mailing Address 100 Indiana Ave NW
 Ste 709

City Washington State DC Zip Code 20001-2196

FEC ID number of contributing federal political committee. **C** C00023580

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 08 / 2022

Transaction ID : VR08C12RVCH5

Amount of Each Receipt this Period
 5000.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 PROTECTING AMERICANS CHALLENGING OPPRESSION (PACO) PAC

Mailing Address 374 N Coast Highway 101
 Ste 2

City Encinitas State CA Zip Code 92024-2542

FEC ID number of contributing federal political committee. **C** C00723577

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 25 / 2022

Transaction ID : VR08C12T8V64

Amount of Each Receipt this Period
 5000.00

Memo Item

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

Mailing Address

City State Zip Code

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	10000.00
TOTAL This Period (last page this line number only).....	25000.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144-3132

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		07		2022

FEC Identification Number

C [Redacted]
Transaction ID : VQZ94APZM
 Amount of Each Disbursement this Period
 [Redacted] 681.41

Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144-3132

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		14		2022

FEC Identification Number

C [Redacted]
Transaction ID : VQZ94APZSV
 Amount of Each Disbursement this Period
 [Redacted] 831.60

Memo Item

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144-3132

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		21		2022

FEC Identification Number

C [Redacted]
Transaction ID : VQZ94APZYI
 Amount of Each Disbursement this Period
 [Redacted] 931.96

Memo Item

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

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

[Redacted] 2444.97
[Redacted]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. ActBlue Technical Services

Full Name (Last, First, Middle Initial)

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144-3132

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 02 / 27 / 2022

FEC Identification Number: C

Transaction ID : VQZ94AQ047

Amount of Each Disbursement this Period: 900.90

Memo Item

B. ActBlue Technical Services

Full Name (Last, First, Middle Initial)

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144-3132

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 02 / 28 / 2022

FEC Identification Number: C

Transaction ID : VQZ94AQ054

Amount of Each Disbursement this Period: 231.33

Memo Item

C. Amalgamated Bank

Full Name (Last, First, Middle Initial)

Mailing Address 275 7Th Ave

City New York State NY Zip Code 10001-8400

Purpose of Disbursement
Bank Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 02 / 25 / 2022

FEC Identification Number: C

Transaction ID : VQZ94AQ011

Amount of Each Disbursement this Period: 10.00

Memo Item

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

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

1142.23

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

Full Name (Last, First, Middle Initial)

A. Amalgamated Bank

Mailing Address 275 7Th Ave

City New York State NY Zip Code 10001-8400

Purpose of Disbursement
Bank Fees

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
02 / 25 / 2022

FEC Identification Number

C
Transaction ID : VQZ94AQ01I
Amount of Each Disbursement this Period
10.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Amalgamated Bank

Mailing Address 275 7Th Ave

City New York State NY Zip Code 10001-8400

Purpose of Disbursement
Bank Fees

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
02 / 25 / 2022

FEC Identification Number

C
Transaction ID : VQZ94AQ01J
Amount of Each Disbursement this Period
91.20

Memo Item

Full Name (Last, First, Middle Initial)

C. American Express Company

Mailing Address 3 World Financial Ctr
200 Vesey Street

City New York State NY Zip Code 10285-0001

Purpose of Disbursement
Credit Card Payment

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
02 / 16 / 2022

FEC Identification Number

C
Transaction ID : VQZ94APZZI
Amount of Each Disbursement this Period
1269.81

Memo Item

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

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

1371.01

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Lyft

Full Name (Last, First, Middle Initial)

Mailing Address 185 Berry St

City San Francisco State CA Zip Code 94107-5705

Purpose of Disbursement Transportation

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 16 / 2022

FEC Identification Number: C

Transaction ID : VQZ94APZZH

Amount of Each Disbursement this Period: 9.42

Memo Item

B. Lyft

Full Name (Last, First, Middle Initial)

Mailing Address 185 Berry St

City San Francisco State CA Zip Code 94107-5705

Purpose of Disbursement Transportation

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 16 / 2022

FEC Identification Number: C

Transaction ID : VQZ94APZZH

Amount of Each Disbursement this Period: 12.85

Memo Item

C. Tatango

Full Name (Last, First, Middle Initial)

Mailing Address 2211 Elliott Ave Ste 200

City Seattle State WA Zip Code 98121-3622

Purpose of Disbursement Texting Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 16 / 2022

FEC Identification Number: C

Transaction ID : VQZ94APZZI

Amount of Each Disbursement this Period: 210.94

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Congressional Progressive Caucus PAC

Full Name (Last, First, Middle Initial)

A. The Cook Political Report

Mailing Address 2311 Wilson Blvd
FI 3

City
Arlington

State
VA

Zip Code
22201-5436

Purpose of Disbursement
Subscription

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [Redacted]
Transaction ID : VQZ94APZZC
Amount of Each Disbursement this Period
[Redacted] 371.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Brown, Evan, , ,

Mailing Address 965 Florida Ave NW
Apt 728

City
Washington

State
DC

Zip Code
20001-5587

Purpose of Disbursement
Cell Phone Reimbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [Redacted]
Transaction ID : VQZ94APZXH
Amount of Each Disbursement this Period
[Redacted] 36.15

Memo Item

Full Name (Last, First, Middle Initial)

C. Brown, Evan, , ,

Mailing Address 965 Florida Ave NW
Apt 728

City
Washington

State
DC

Zip Code
20001-5587

Purpose of Disbursement
Salary

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [Redacted]
Transaction ID : VQZ94APZX.
Amount of Each Disbursement this Period
[Redacted] 2843.64

Memo Item

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

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

[Redacted]	2879.79
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[Redacted]	
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

Full Name (Last, First, Middle Initial) A. Brown, Evan, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2022
Mailing Address 965 Florida Ave NW Apt 728		FEC Identification Number C [REDACTED] Transaction ID : VQZ94AQ01F Amount of Each Disbursement this Period [REDACTED] 36.15
City Washington	State DC	Zip Code 20001-5587
Purpose of Disbursement Cell Phone Reimbursement		Category/Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Brown, Evan, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2022
Mailing Address 965 Florida Ave NW Apt 728		FEC Identification Number C [REDACTED] Transaction ID : VQZ94AQ01G Amount of Each Disbursement this Period [REDACTED] 2843.64
City Washington	State DC	Zip Code 20001-5587
Purpose of Disbursement Salary		Category/Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. DC Health Link		Date of Disbursement MM / DD / YYYY 02 / 01 / 2022
Mailing Address 645 H St NE		FEC Identification Number C [REDACTED] Transaction ID : VQZ94APZJ8 Amount of Each Disbursement this Period [REDACTED] 489.72
City Washington	State DC	Zip Code 20002-4347
Purpose of Disbursement Health Insurance		Category/Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 3369.51
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

Full Name (Last, First, Middle Initial)

A. Elias Law Group

Mailing Address 10 G St NE
Ste 600

City Washington State DC Zip Code 20002-4253

Purpose of Disbursement
Legal Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 16 / 2022

FEC Identification Number

C
Transaction ID : VQZ94APZXS
Amount of Each Disbursement this Period
1082.25

Memo Item

Full Name (Last, First, Middle Initial)

B. Evans & Katz, LLC

Mailing Address PO Box 33079

City Washington State DC Zip Code 20033-0079

Purpose of Disbursement
Compliance Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 18 / 2022

FEC Identification Number

C
Transaction ID : VQZ94APZXC
Amount of Each Disbursement this Period
3197.26

Memo Item

Full Name (Last, First, Middle Initial)

C. Fidelity Investments Institutional Operations Company

Mailing Address PO Box 770002

City Cincinnati State OH Zip Code 45277-1102

Purpose of Disbursement
Employee Retirement Plan

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2022

FEC Identification Number

C
Transaction ID : VQZ94APZX
Amount of Each Disbursement this Period
1011.53

Memo Item

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

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

5291.04

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

Form with checkboxes for line numbers 21b, 22, 23, 24, 25, 26, 27, 28a, 28b, 28c, 29, 30b. 21b is checked.

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

Form A: Fidelity Investments Institutional Operations Company. Includes fields for Date of Disbursement (02/25/2022), Mailing Address (PO Box 770002), City (Cincinnati), State (OH), Zip Code (45277-1102), Purpose of Disbursement (Employee Retirement Plan), Candidate Name, Office Sought, Disbursement For, and Amount of Each Disbursement (1011.53).

Form B: GA Campaigns. Includes fields for Date of Disbursement (02/28/2022), Mailing Address (700 K St NW Ste 300), City (Washington), State (DC), Zip Code (20001-5692), Purpose of Disbursement (List Rental), Candidate Name, Office Sought, Disbursement For, and Amount of Each Disbursement (1000.00).

Form C: Gusto. Includes fields for Date of Disbursement (02/02/2022), Mailing Address (525 20Th St), City (San Francisco), State (CA), Zip Code (94107-4345), Purpose of Disbursement (Payroll Services), Candidate Name, Office Sought, Disbursement For, and Amount of Each Disbursement (71.55).

SUBTOTAL of Disbursements This Page (optional) 2083.08
TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

Full Name (Last, First, Middle Initial)

A. Gusto

Mailing Address 525 20Th St

City San Francisco State CA Zip Code 94107-4345

Purpose of Disbursement
Payroll Taxes

Candidate Name

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		10		2022

FEC Identification Number

C [Redacted]
Transaction ID : VQZ94APZX
 Amount of Each Disbursement this Period
 [Redacted] 3184.51

Memo Item

Full Name (Last, First, Middle Initial)

B. Gusto

Mailing Address 525 20Th St

City San Francisco State CA Zip Code 94107-4345

Purpose of Disbursement
Payroll Taxes

Candidate Name

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		10		2022

FEC Identification Number

C [Redacted]
Transaction ID : VQZ94APZX
 Amount of Each Disbursement this Period
 [Redacted] 189.28

Memo Item

Full Name (Last, First, Middle Initial)

C. Gusto

Mailing Address 525 20Th St

City San Francisco State CA Zip Code 94107-4345

Purpose of Disbursement
Payroll Taxes

Candidate Name

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		25		2022

FEC Identification Number

C [Redacted]
Transaction ID : VQZ94AQ011
 Amount of Each Disbursement this Period
 [Redacted] 3343.26

Memo Item

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

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

[Redacted] 6717.05

[Redacted]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Kieloch Consulting

Full Name (Last, First, Middle Initial)

Mailing Address 228 2Nd St SE

City Washington State DC Zip Code 20003-1943

Purpose of Disbursement Fundraising Consulting Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 01 / 2022

FEC Identification Number: C

Transaction ID : VQZ94APZJ4

Amount of Each Disbursement this Period: 4000.00

Memo Item

B. Machak, Manjiri, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1450 Church St NW Apt C01

City Washington State DC Zip Code 20005-7015

Purpose of Disbursement Cell Phone Reimbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 10 / 2022

FEC Identification Number: C

Transaction ID : VQZ94APZXK

Amount of Each Disbursement this Period: 34.63

Memo Item

C. Machak, Manjiri, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1450 Church St NW Apt C01

City Washington State DC Zip Code 20005-7015

Purpose of Disbursement Salary

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 10 / 2022

FEC Identification Number: C

Transaction ID : VQZ94APZXI

Amount of Each Disbursement this Period: 2989.98

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 7024.61

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

Full Name (Last, First, Middle Initial) A. Machak, Manjiri, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2022	
Mailing Address 1450 Church St NW Apt C01		FEC Identification Number C [REDACTED] Transaction ID : VQZ94AQ01F Amount of Each Disbursement this Period [REDACTED] 34.63	
City Washington	State DC	Zip Code 20005-7015	Category/ Type [REDACTED]
Purpose of Disbursement Cell Phone Reimbursement		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. Machak, Manjiri, , ,		Date of Disbursement MM / DD / YYYY 02 / 24 / 2022	
Mailing Address 1450 Church St NW Apt C01		FEC Identification Number C [REDACTED] Transaction ID : VQZ94AQ01S Amount of Each Disbursement this Period [REDACTED] 2989.97	
City Washington	State DC	Zip Code 20005-7015	Category/ Type [REDACTED]
Purpose of Disbursement Salary		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. Mothership Strategies		Date of Disbursement MM / DD / YYYY 02 / 04 / 2022	
Mailing Address 1328 Florida Ave NW Ste C		FEC Identification Number C [REDACTED] Transaction ID : VQZ94APZJF Amount of Each Disbursement this Period [REDACTED] 10884.00	
City Washington	State DC	Zip Code 20009-4827	Category/ Type [REDACTED]
Purpose of Disbursement Digital Strategy Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 13908.60
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

Full Name (Last, First, Middle Initial)

A. Mothership Strategies

Mailing Address 1328 Florida Ave NW
Ste C

City Washington State DC Zip Code 20009-4827

Purpose of Disbursement
Digital Strategy Consulting Services

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 14 / 2022

FEC Identification Number

C
Transaction ID : VQZ94APZX
Amount of Each Disbursement this Period
30000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Mothership Strategies

Mailing Address 1328 Florida Ave NW
Ste C

City Washington State DC Zip Code 20009-4827

Purpose of Disbursement
List Building and Fundraising Consulting Services

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 25 / 2022

FEC Identification Number

C
Transaction ID : VQZ94AQ01N
Amount of Each Disbursement this Period
35429.00

Memo Item

Full Name (Last, First, Middle Initial)

C. NGP VAN

Mailing Address 1445 New York Ave NW
Ste 200

City Washington State DC Zip Code 20005-2158

Purpose of Disbursement
Software Services

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2022

FEC Identification Number

C
Transaction ID : VQZ94APZJ/
Amount of Each Disbursement this Period
265.00

Memo Item

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

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

65694.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Congressional Progressive Caucus PAC

Full Name (Last, First, Middle Initial)

A. Olson Remcho LLP

Mailing Address 555 Capitol Mall
Ste 400

City
Sacramento

State
CA

Zip Code
95814-4503

Purpose of Disbursement
Legal Services

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [Redacted]
Transaction ID : VQZ94APZXF
Amount of Each Disbursement this Period
[Redacted] 1150.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Slamowitz, Anneliese, , ,

Mailing Address 811 Emerson St
Apt 330

City
Evanston

State
IL

Zip Code
60201-3888

Purpose of Disbursement
Salary

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [Redacted]
Transaction ID : VQZ94APZXC
Amount of Each Disbursement this Period
[Redacted] 649.66

Memo Item

Full Name (Last, First, Middle Initial)

C. Slamowitz, Anneliese, , ,

Mailing Address 811 Emerson St
Apt 330

City
Evanston

State
IL

Zip Code
60201-3888

Purpose of Disbursement
Salary

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [Redacted]
Transaction ID : VQZ94AQ01
Amount of Each Disbursement this Period
[Redacted] 534.31

Memo Item

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

2333.97

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

114259.86

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

Grid for line numbers 21b-30b with checkboxes, where 23 is checked.

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

Form A: ANDY LEVIN FOR CONGRESS. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

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

Form C: Empty form with fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

Summary table with two rows: SUBTOTAL of Disbursements This Page (optional) and TOTAL This Period (last page this line number only). Both show a value of 10000.00.

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

Full Name (Last, First, Middle Initial) A. Sochet, Mary, , ,		Date of Disbursement MM / DD / YYYY 02 / 27 / 2022	
Mailing Address 380 Riverside Dr		FEC Identification Number C [REDACTED] Transaction ID : VQZ94AQ049 Amount of Each Disbursement this Period 70.00	
City New York	State NY	Zip Code 10025-1858	Category/ Type
Purpose of Disbursement Refund		Memo Item <input type="checkbox"/>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Sochet, Mary, , ,		Date of Disbursement MM / DD / YYYY 02 / 27 / 2022	
Mailing Address 380 Riverside Dr		FEC Identification Number C [REDACTED] Transaction ID : VQZ94AQ04A Amount of Each Disbursement this Period 35.00	
City New York	State NY	Zip Code 10025-1858	Category/ Type
Purpose of Disbursement Refund		Memo Item <input type="checkbox"/>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Sochet, Mary, , ,		Date of Disbursement MM / DD / YYYY 02 / 27 / 2022	
Mailing Address 380 Riverside Dr		FEC Identification Number C [REDACTED] Transaction ID : VQZ94AQ04I Amount of Each Disbursement this Period 35.00	
City New York	State NY	Zip Code 10025-1858	Category/ Type
Purpose of Disbursement Refund		Memo Item <input type="checkbox"/>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	140.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Sochet, Mary, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 380 Riverside Dr

City New York State NY Zip Code 10025-1858

Purpose of Disbursement Refund

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 27 / 2022

FEC Identification Number: C

Transaction ID : VQZ94AQ04E

Amount of Each Disbursement this Period: 35.00

Memo Item

B. Sochet, Mary, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 380 Riverside Dr

City New York State NY Zip Code 10025-1858

Purpose of Disbursement Refund

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 27 / 2022

FEC Identification Number: C

Transaction ID : VQZ94AQ04K

Amount of Each Disbursement this Period: 18.00

Memo Item

C. Sochet, Mary, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 380 Riverside Dr

City New York State NY Zip Code 10025-1858

Purpose of Disbursement Refund

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 27 / 2022

FEC Identification Number: C

Transaction ID : VQZ94AQ04I

Amount of Each Disbursement this Period: 20.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 73.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

A. Sochet, Mary, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 380 Riverside Dr

City New York State NY Zip Code 10025-1858

Purpose of Disbursement Refund

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 27 / 2022

FEC Identification Number: C

Transaction ID : VQZ94AQ04S

Amount of Each Disbursement this Period: 15.00

Memo Item

B. Sochet, Mary, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 380 Riverside Dr

City New York State NY Zip Code 10025-1858

Purpose of Disbursement Refund

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 27 / 2022

FEC Identification Number: C

Transaction ID : VQZ94AQ04T

Amount of Each Disbursement this Period: 21.00

Memo Item

C. Sochet, Mary, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 380 Riverside Dr

City New York State NY Zip Code 10025-1858

Purpose of Disbursement Refund

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 27 / 2022

FEC Identification Number: C

Transaction ID : VQZ94AQ04I

Amount of Each Disbursement this Period: 70.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 106.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

Full Name (Last, First, Middle Initial)

A. Sochet, Mary, , ,

Mailing Address 380 Riverside Dr

City New York State NY Zip Code 10025-1858

Purpose of Disbursement Refund

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2022

FEC Identification Number

C
Transaction ID : VQZ94AQ04
 Amount of Each Disbursement this Period
 21.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Sochet, Mary, , ,

Mailing Address 380 Riverside Dr

City New York State NY Zip Code 10025-1858

Purpose of Disbursement Refund

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 27 / 2022

FEC Identification Number

C
Transaction ID : VQZ94AQ051
 Amount of Each Disbursement this Period
 30.00

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY

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)..... ▶

51.00
370.00