

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines PROGRESSIVE CHOICES PAC

ADDRESS (number and street) P.O. BOX 58 Check if different than previously reported. (ACC) EVANSTON IL 60204

2. FEC IDENTIFICATION NUMBER C00381806 3. IS THIS REPORT NEW (N) OR AMENDED (A)

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

5. Covering Period 06 01 2010 through 06 30 2010

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

Type or Print Name of Treasurer Karen Lennon

Signature of Treasurer Electronically Filed by Karen Lennon Date 07 19 2010

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

Table with 7 columns and 1 row for Office Use Only

FEC FORM 3X (Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
PROGRESSIVE CHOICES PAC

Report Covering the Period: From:

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		37941.48
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	33906.99									
(c) Total Receipts (from Line 19)	30500.00	55100.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	64406.99	93041.48								
7. Total Disbursements (from Line 31)	11633.89	40268.38								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	52773.10	52773.10								
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
PROGRESSIVE CHOICES PAC

Report Covering the Period: From: To:

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	0.00	16750.00
(ii) Unitemized	0.00	350.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	17100.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	30500.00	38000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	30500.00	55100.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (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))	30500.00	55100.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	30500.00	55100.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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.....	633.89	4268.38
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	633.89	4268.38
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	11000.00	36000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	11633.89	40268.38
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	11633.89	40268.38

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	30500.00	55100.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	30500.00	55100.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	633.89	4268.38
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	633.89	4268.38

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

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

FOR LINE NUMBER: PAGE 6 / 15
(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)
PROGRESSIVE CHOICES PAC

A. Full Name (Last, First, Middle Initial)
American Academy of Family Physicians PAC
 Mailing Address 2021 Massachusetts Avenue, NW
 City State Zip Code
 Washington DC 20036
 Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 3 0 / 2 0 1 0
Transaction ID: SA11C.4539
 Amount of Each Receipt this Period
 2500.00
 FEC ID number of contributing federal political committee. **C** C00411553
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

B. Full Name (Last, First, Middle Initial)
American Association for Justice PAC
 Mailing Address 1050 31st Street, NW
 City State Zip Code
 Washington DC 20007
 Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 3 0 / 2 0 1 0
Transaction ID: SA11C.4532
 Amount of Each Receipt this Period
 5000.00
 FEC ID number of contributing federal political committee. **C** C00024521
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

C. Full Name (Last, First, Middle Initial)
American Hospital Association PAC
 Mailing Address 325 Seventh Street NW
 City State Zip Code
 Washington DC 20004
 Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 2 3 / 2 0 1 0
Transaction ID: SA11C.4529
 Amount of Each Receipt this Period
 1000.00
 FEC ID number of contributing federal political committee. **C** C00106146
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

SUBTOTAL of Receipts This Page (optional) ► 8500.00
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 7 / 15
	(check only one)
<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

A. Full Name (Last, First, Middle Initial)
American Maritime Officers Voluntary PAF

Mailing Address **2 West Dixie Highway**

City **Dania Beach** State **FL** Zip Code **33004**

FEC ID number of contributing federal political committee. **C C00027532**

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **06 / 23 / 2010**

Transaction ID: SA11C.4527

Amount of Each Receipt this Period **1000.00**

B. Full Name (Last, First, Middle Initial)
American Optometric Association PAC

Mailing Address **1505 Prince Street, #300**

City **Alexandria** State **VA** Zip Code **22314**

FEC ID number of contributing federal political committee. **C C00024968**

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt **06 / 30 / 2010**

Transaction ID: SA11C.4535

Amount of Each Receipt this Period **5000.00**

C. Full Name (Last, First, Middle Initial)
American Podiatric Medical Association PAC

Mailing Address **9312 Old Georgetown Road**

City **Bethesda** State **MD** Zip Code **20814**

FEC ID number of contributing federal political committee. **C C00008839**

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2500.00**

Date of Receipt **06 / 18 / 2010**

Transaction ID: SA11C.4523

Amount of Each Receipt this Period **2500.00**

SUBTOTAL of Receipts This Page (optional) ► **8500.00**

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

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

A. Full Name (Last, First, Middle Initial)
 Association for the Advancement of Psychology, Inc. (PLAN)
 Mailing Address P.O. Box 38129

City State Zip Code
 Colorado Springs CO 80937

FEC ID number of contributing federal political committee. **C** C00002956

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 1 8 / 2 0 1 0

Transaction ID: SA11C.4525

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
 Association of Professional Flight Attendants (APFA PAC)
 Mailing Address 1004 W. Eules Blvd.

City State Zip Code
 Eules TX 76040

FEC ID number of contributing federal political committee. **C** C00246421

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 2 3 / 2 0 1 0

Transaction ID: SA11C.4531

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
 Intl. Brotherhood of Electrical Workers PAC
 Mailing Address 900 Seventh Street NW

City State Zip Code
 Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00027342

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 1 8 / 2 0 1 0

Transaction ID: SA11C.4521

Amount of Each Receipt this Period
 5000.00

SUBTOTAL of Receipts This Page (optional) ► **7000.00**

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 9 / 15
	(check only one)
<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

A.

Full Name (Last, First, Middle Initial) Machinists Non-Partisan Political League PAC		Date of Receipt
Mailing Address 9000 Machinist Place		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
City	State	Zip Code
Upper Marlboro	MD	20772
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00002469"/>	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	
		Transaction ID: SA11C.4534
		Amount of Each Receipt this Period <input type="text" value="5000.00"/>

B.

Full Name (Last, First, Middle Initial) United Food and Commercial Workers ABC		Date of Receipt
Mailing Address 1775 K Street N.W.		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
City	State	Zip Code
Washington	DC	20006
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00002766"/>	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1500.00"/>	
		Transaction ID: SA11C.4537
		Amount of Each Receipt this Period <input type="text" value="1500.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="6500.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="30500.00"/>

**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)

PAGE 10 / 15

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

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

A.	Full Name (Last, First, Middle Initial) AT&T	Transaction ID: SB21B.4482 Date of Disbursement 06 / 02 / 2010
	Mailing Address 175 East Houston Street	Amount of Each Disbursement this Period 62.39
	City San Antonio State TX Zip Code 78205	
	Purpose of Disbursement Telephone Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Broadway 55 LLC	Transaction ID: SB21B.4520 Date of Disbursement 06 / 30 / 2010
	Mailing Address Broadway 55 LLC	Amount of Each Disbursement this Period 300.00
	City Chicago State IL Zip Code 60601	
	Purpose of Disbursement Office Rent Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Chase Cardmember Services	Transaction ID: SB21B.4484 Date of Disbursement 06 / 18 / 2010
	Mailing Address P.O. Box 15153	Amount of Each Disbursement this Period 228.50
	City Wilmington State DE Zip Code 19886	
	Purpose of Disbursement Itemized Transactions Below Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	590.89
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)

PAGE 11 / 15

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

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

A.

Full Name (Last, First, Middle Initial)
U.S. Postmaster

Mailing Address 1101 Davis

City State Zip Code
Evanston IL 60201

Purpose of Disbursement
Postage

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.4484.0

Date of Disbursement

/ /

Amount of Each Disbursement this Period

176.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

590.89

**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)

PAGE 12 / 15

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

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

A.	Full Name (Last, First, Middle Initial) CIRO RODRIGUEZ FOR CONGRESS	Transaction ID: SB23.4503
	Mailing Address PO Box 14528	Date of Disbursement 06 / 25 / 2010
	City San Antonio State TX Zip Code 78214	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name CIRO D. RODRIGUEZ	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 23	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) DAN SEALS FOR CONGRESS	Transaction ID: SB23.4506
	Mailing Address P.O. Box 584	Date of Disbursement 06 / 25 / 2010
	City Wilmette State IL Zip Code 60091	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name DANIEL JOSEPH SEALS	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) DINA TITUS FOR CONGRESS	Transaction ID: SB23.4491
	Mailing Address PO Box 50614	Date of Disbursement 06 / 25 / 2010
	City Henderson State NV Zip Code 89016	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name DINA TITUS	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 03	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

A. Full Name (Last, First, Middle Initial)
FRIENDS OF STEPHENE MOORE

Mailing Address PO BOX 19550

City LENEKA State KS Zip Code 66285

Purpose of Disbursement
Contribution

Candidate Name
STEPHENE ANN MOORE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: KS District: 03

Transaction ID: SB23.4511

Date of Disbursement

06 / 25 / 2010

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
FRIENDS OF TARRYL CLARK

Mailing Address PO Box 489

City St Cloud State MN Zip Code 56302

Purpose of Disbursement
Contribution

Candidate Name
TARRYL LYNN CLARK

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: MN District: 06

Transaction ID: SB23.4517

Date of Disbursement

06 / 30 / 2010

Amount of Each Disbursement this Period

1000.00

C. Full Name (Last, First, Middle Initial)
HALVORSON FOR CONGRESS

Mailing Address PO Box 176

City Crete State IL Zip Code 60417

Purpose of Disbursement
Contribution

Candidate Name
DEBORAH 'DEBBIE' HALVORSON

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: IL District: 11

Transaction ID: SB23.4500

Date of Disbursement

06 / 25 / 2010

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

A. Full Name (Last, First, Middle Initial)
HARRY MITCHELL FOR CONGRESS

Mailing Address PO Box 23748

City State Zip Code
Tempe AZ 85285

Purpose of Disbursement
Contribution

Candidate Name
HARRY E. MITCHELL

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: AZ District: 05

Transaction ID: SB23.4497

Date of Disbursement

06 / 25 / 2010

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
JOE GARCIA FOR CONGRESS

Mailing Address 210 MENDOZA AVE

City State Zip Code
CORAL GABLES FL 33141

Purpose of Disbursement
Contribution

Candidate Name
JOSE ANTONIO GARCIA

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: FL District: 25

Transaction ID: SB23.4510

Date of Disbursement

06 / 25 / 2010

Amount of Each Disbursement this Period

1000.00

C. Full Name (Last, First, Middle Initial)
KOSMAS FOR CONGRESS

Mailing Address PO Box 1547

City State Zip Code
New Smyrna Beach FL 32170

Purpose of Disbursement
Contribution

Candidate Name
SUZANNE KOSMAS

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: FL District: 24

Transaction ID: SB23.4494

Date of Disbursement

06 / 25 / 2010

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

A.

Full Name (Last, First, Middle Initial)
MARK CRITZ FOR CONGRESS COMMITTEE

Transaction ID: SB23.4490

Date of Disbursement

Mailing Address 551 MAIN STREET SUITE 120

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	1	0

City JOHNSTOWN State PA Zip Code 15901

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Contribution

--

Candidate Name
MARK CRITZ

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: PA District: 12

B.

Full Name (Last, First, Middle Initial)
MARTIN HEINRICH FOR CONGRESS, INC.

Transaction ID: SB23.4514

Date of Disbursement

Mailing Address 2118 CENTRAL AVENUE SE #71

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	1	0

City Albuquerque State NM Zip Code 87106

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Contribution

--

Candidate Name
MARTIN HEINRICH

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: NM District: 01

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

11000.00
