

# 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  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period  /  /  2021 through  /  /  2021

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  /  /  2021

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="2021"/>		1311615.10
(b) Cash on Hand at Beginning of Reporting Period.....	1403532.06	
(c) Total Receipts (from Line 19) .....	177341.11	348426.53
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	1580873.17	1660041.63
7. Total Disbursements (from Line 31).....	191068.13	270236.59
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	1389805.04	1389805.04
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> 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

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).....	30095.36	43183.86
(ii) Unitemized .....	142245.75	295242.67
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	172341.11	338426.53
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	5000.00	10000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	177341.11	348426.53
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)).....▶	177341.11	348426.53
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	177341.11	348426.53

**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 .....	179505.13	254498.59
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	179505.13	254498.59
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	5000.00
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 .....	6563.00	10738.00
(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)).....	6563.00	10738.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	191068.13	270236.59
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	191068.13	270236.59

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	177341.11	348426.53
34. Total Contribution Refunds (from Line 28(d)) .....	6563.00	10738.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	170778.11	337688.53
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	179505.13	254498.59
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	179505.13	254498.59

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 295
	<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.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Abtahi, Fereydoun, , ,

Mailing Address 1402 Desale St SW

City Vienna	State VA	Zip Code 22180-6734
----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021

**Transaction ID : VR08C10WMCC3**

Amount of Each Receipt this Period  
15.00

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Abtahi, Fereydoun, , ,

Mailing Address 1402 Desale St SW

City Vienna	State VA	Zip Code 22180-6734
----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021

**Transaction ID : VR08C10WMCD1**

Amount of Each Receipt this Period  
15.00

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Abtahi, Fereydoun, , ,

Mailing Address 1402 Desale St SW

City Vienna	State VA	Zip Code 22180-6734
----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021

**Transaction ID : VR08C111FH27**

Amount of Each Receipt this Period  
35.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	65.00
<b>TOTAL</b> 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 295
	<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. Abtahi, Fereydoun, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1402 Desale St SW  
 City Vienna State VA Zip Code 22180-6734  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C11201A1**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**B. Abtahi, Fereydoun, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1402 Desale St SW  
 City Vienna State VA Zip Code 22180-6734  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C11231G1**  
 Amount of Each Receipt this Period  
 5.00  
 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 ▼ 275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y3EF1**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	35.00
<b>TOTAL</b> 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 295
	<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. 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 ▼ 275.00

Date of Receipt **02 / 15 / 2021**  
**Transaction ID : VR08C10Y4MC9**  
 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 ▼ 275.00

Date of Receipt **02 / 22 / 2021**  
**Transaction ID : VR08C111EX99**  
 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 ▼ 275.00

Date of Receipt **02 / 22 / 2021**  
**Transaction ID : VR08C111F0D7**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	35.00
<b>TOTAL</b> 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 295
	<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. 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 ▼ 275.00

Date of Receipt  
 02 / 22 / 2021  
**Transaction ID : VR08C111FBV9**  
 Amount of Each Receipt this Period 35.00  
 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 ▼ 275.00

Date of Receipt  
 02 / 22 / 2021  
**Transaction ID : VR08C111FWK4**  
 Amount of Each Receipt this Period 5.00  
 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 ▼ 275.00

Date of Receipt  
 02 / 22 / 2021  
**Transaction ID : VR08C111G1G0**  
 Amount of Each Receipt this Period 35.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	75.00
<b>TOTAL</b> 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 10 OF 295
	<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. 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 ▼ 275.00

Date of Receipt  
 02 / 22 / 2021  
**Transaction ID : VR08C111H5D4**  
 Amount of Each Receipt this Period 35.00  
 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 ▼ 275.00

Date of Receipt  
 02 / 22 / 2021  
**Transaction ID : VR08C111JMY8**  
 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 ▼ 275.00

Date of Receipt  
 02 / 28 / 2021  
**Transaction ID : VR08C111ZAN9**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	75.00
<b>TOTAL</b> 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 11 OF 295
	<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. Anderson, Clifford, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1408 La Sierra Dr  
 City Sacramento State CA Zip Code 95864-3035  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSU Sacramento Occupation (for Individual) Teacher  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 346.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WK4D6**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**B. Anderson, Clifford, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1408 La Sierra Dr  
 City Sacramento State CA Zip Code 95864-3035  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSU Sacramento Occupation (for Individual) Teacher  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 346.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WKRM5**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**C. Anderson, Clifford, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1408 La Sierra Dr  
 City Sacramento State CA Zip Code 95864-3035  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSU Sacramento Occupation (for Individual) Teacher  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 346.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WME29**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	25.00
<b>TOTAL</b> 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 12 OF 295
	<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. Anderson, Clifford, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1408 La Sierra Dr  
 City Sacramento State CA Zip Code 95864-3035  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSU Sacramento Occupation (for Individual) Teacher  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 346.00

Date of Receipt **02 / 08 / 2021**  
**Transaction ID : VR08C10WNNN2**  
 Amount of Each Receipt this Period 7.00  
 Memo Item

**B. Anderson, Clifford, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1408 La Sierra Dr  
 City Sacramento State CA Zip Code 95864-3035  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSU Sacramento Occupation (for Individual) Teacher  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 346.00

Date of Receipt **02 / 15 / 2021**  
**Transaction ID : VR08C10Y4D18**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**C. Anderson, Clifford, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1408 La Sierra Dr  
 City Sacramento State CA Zip Code 95864-3035  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSU Sacramento Occupation (for Individual) Teacher  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 346.00

Date of Receipt **02 / 15 / 2021**  
**Transaction ID : VR08C10Y4EV5**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	47.00
<b>TOTAL</b> 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 13 OF 295
	<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.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Anderson, Clifford, , ,

Mailing Address 1408 La Sierra Dr

City Sacramento	State CA	Zip Code 95864-3035
--------------------	-------------	------------------------

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

Name of Employer (for Individual) CSU Sacramento	Occupation (for Individual) Teacher
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
346.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y4PW9**

Amount of Each Receipt this Period  
 15.00

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Anderson, Clifford, , ,

Mailing Address 1408 La Sierra Dr

City Sacramento	State CA	Zip Code 95864-3035
--------------------	-------------	------------------------

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

Name of Employer (for Individual) CSU Sacramento	Occupation (for Individual) Teacher
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
346.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111GZR8**

Amount of Each Receipt this Period  
 7.00

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Anderson, Clifford, , ,

Mailing Address 1408 La Sierra Dr

City Sacramento	State CA	Zip Code 95864-3035
--------------------	-------------	------------------------

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

Name of Employer (for Individual) CSU Sacramento	Occupation (for Individual) Teacher
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
346.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111H4Y6**

Amount of Each Receipt this Period  
 15.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	37.00
<b>TOTAL</b> 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 14 OF 295
	<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. Anderson, Clifford, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1408 La Sierra Dr  
 City Sacramento State CA Zip Code 95864-3035  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSU Sacramento Occupation (for Individual) Teacher  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 346.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111H4Z4**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**B. Anderson, Clifford, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1408 La Sierra Dr  
 City Sacramento State CA Zip Code 95864-3035  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSU Sacramento Occupation (for Individual) Teacher  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 346.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111H502**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**C. Anderson, Clifford, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1408 La Sierra Dr  
 City Sacramento State CA Zip Code 95864-3035  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSU Sacramento Occupation (for Individual) Teacher  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 346.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111J9T2**  
 Amount of Each Receipt this Period 3.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	33.00
<b>TOTAL</b> 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 15 OF 295
	<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. Anderson, Clifford, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1408 La Sierra Dr  
 City Sacramento State CA Zip Code 95864-3035  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSU Sacramento Occupation (for Individual) Teacher  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 346.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1120W00**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**B. Anderson, Clifford, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1408 La Sierra Dr  
 City Sacramento State CA Zip Code 95864-3035  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSU Sacramento Occupation (for Individual) Teacher  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 346.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1121MB5**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**C. Anderson, Clifford, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1408 La Sierra Dr  
 City Sacramento State CA Zip Code 95864-3035  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSU Sacramento Occupation (for Individual) Teacher  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 346.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1122376**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	35.00
<b>TOTAL</b> 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 16 OF 295
	<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. Applegate, Jeff, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 39 5Th Ave # 5CD  
 City New York State NY Zip Code 10003-4339  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WM2S3**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**B. Applegate, Jeff, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 39 5Th Ave # 5CD  
 City New York State NY Zip Code 10003-4339  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WNGK6**  
 Amount of Each Receipt this Period  
 100.00  
 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 / 08 / 2021  
**Transaction ID : VR08C10WNRH6**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	205.00
<b>TOTAL</b> 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 295
	<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.** 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  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y2667**

Amount of Each Receipt this Period  
 15.00

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  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y3DV5**

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  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111FB82**

Amount of Each Receipt this Period  
 15.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	45.00
<b>TOTAL</b> 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 295
	<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  
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  
 02 / 22 / 2021

**Transaction ID : VR08C111GN07**

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  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021

**Transaction ID : VR08C111GQF9**

Amount of Each Receipt this Period  
50.00

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  
 02 / 28 / 2021

**Transaction ID : VR08C1122NW1**

Amount of Each Receipt this Period  
5.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	60.00
<b>TOTAL</b> 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 295
	(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. 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 / 28 / 2021  
**Transaction ID : VR08C1122XB2**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**B. Asch, Esther-Ann, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 525 E 86Th St  
 City New York State NY Zip Code 10028-7512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 309.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WN4J2**  
 Amount of Each Receipt this Period  
 3.00  
 Memo Item

**C. Asch, Esther-Ann, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 525 E 86Th St  
 City New York State NY Zip Code 10028-7512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 309.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y4C08**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	328.00
<b>TOTAL</b> 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 295
	<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. Bajwa, Meera, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1374 Sylvan Dr  
 City Hollidaysburg State PA Zip Code 16648-2726  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blair Renal Associates Occupation (for Individual) Physician  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **02 / 28 / 2021**  
**Transaction ID : VR08C111ZQ01**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Bartholet, Carolyn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1912 Lucina Ct  
 City Fort Myers State FL Zip Code 33908-1608  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.50

Date of Receipt **02 / 15 / 2021**  
**Transaction ID : VR08C10Y2778**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Bartholet, Carolyn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1912 Lucina Ct  
 City Fort Myers State FL Zip Code 33908-1608  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 240.50

Date of Receipt **02 / 15 / 2021**  
**Transaction ID : VR08C10Y45Y9**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	525.00
<b>TOTAL</b> 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 21 OF 295
	<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. Bartholet, Carolyn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1912 Lucina Ct  
 City Fort Myers State FL Zip Code 33908-1608  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y5KN6**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**B. Bartholet, Carolyn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1912 Lucina Ct  
 City Fort Myers State FL Zip Code 33908-1608  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111H1Q4**  
 Amount of Each Receipt this Period  
 103.00  
 Memo Item

**C. Bartholet, Carolyn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1912 Lucina Ct  
 City Fort Myers State FL Zip Code 33908-1608  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111HH97**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	133.00
<b>TOTAL</b> 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 295
	<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. Bartholet, Carolyn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1912 Lucina Ct  
 City Fort Myers State FL Zip Code 33908-1608  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C111ZJP3**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**B. Bartholet, Carolyn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1912 Lucina Ct  
 City Fort Myers State FL Zip Code 33908-1608  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C111ZZ07**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**C. Bartholet, Carolyn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1912 Lucina Ct  
 City Fort Myers State FL Zip Code 33908-1608  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1120V07**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	45.00
<b>TOTAL</b> 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 23 OF 295
	<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. Bartholet, Carolyn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1912 Lucina Ct  
 City Fort Myers State FL Zip Code 33908-1608  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C11219A6**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**B. Bartholet, Carolyn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1912 Lucina Ct  
 City Fort Myers State FL Zip Code 33908-1608  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1121HK2**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**C. Bartholet, Carolyn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1912 Lucina Ct  
 City Fort Myers State FL Zip Code 33908-1608  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.50

Date of Receipt  
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 02 / 28 / 2021  
**Transaction ID : VR08C1121HM0**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	45.00
<b>TOTAL</b> 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 295
	<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. Blight, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5106 Norwood Rd  
 City Baltimore State MD Zip Code 21212-4101  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 22 / 2021  
**Transaction ID : VR08C111FN32**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Blondell, Marcell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 W Mechanic St Apt 308  
 City Yale State MI Zip Code 48097-3376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 640.18

Date of Receipt 02 / 08 / 2021  
**Transaction ID : VR08C10WJJR5**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**C. Blondell, Marcell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 W Mechanic St Apt 308  
 City Yale State MI Zip Code 48097-3376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 640.18

Date of Receipt 02 / 08 / 2021  
**Transaction ID : VR08C10WJJS3**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	260.00
<b>TOTAL</b> 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 25 OF 295
	<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. Blondell, Marcell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 W Mechanic St  
 Apt 308  
 City Yale State MI Zip Code 48097-3376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 640.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WKVN9**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**B. Blondell, Marcell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 W Mechanic St  
 Apt 308  
 City Yale State MI Zip Code 48097-3376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 640.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WMJZ6**  
 Amount of Each Receipt this Period  
 7.50  
 Memo Item

**C. Blondell, Marcell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 W Mechanic St  
 Apt 308  
 City Yale State MI Zip Code 48097-3376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 640.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y2D55**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	22.50
<b>TOTAL</b> 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 295
	<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. Blondell, Marcell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 W Mechanic St  
 Apt 308  
 City Yale State MI Zip Code 48097-3376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 640.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y2DE6**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**B. Blondell, Marcell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 W Mechanic St  
 Apt 308  
 City Yale State MI Zip Code 48097-3376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 640.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y2DF4**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**C. Blondell, Marcell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 W Mechanic St  
 Apt 308  
 City Yale State MI Zip Code 48097-3376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 640.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y2J79**  
 Amount of Each Receipt this Period  
 5.09  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	15.09
<b>TOTAL</b> 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 295
	(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. Blondell, Marcell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 W Mechanic St  
 Apt 308  
 City Yale State MI Zip Code 48097-3376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 640.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y2SM7**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

**B. Blondell, Marcell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 W Mechanic St  
 Apt 308  
 City Yale State MI Zip Code 48097-3376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 640.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y36H1**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

**C. Blondell, Marcell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 W Mechanic St  
 Apt 308  
 City Yale State MI Zip Code 48097-3376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 640.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y3N99**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	25.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 28 OF 295
	(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. Blondell, Marcell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 W Mechanic St  
 Apt 308  
 City Yale State MI Zip Code 48097-3376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 640.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y3ZB6**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**B. Blondell, Marcell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 W Mechanic St  
 Apt 308  
 City Yale State MI Zip Code 48097-3376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 640.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y4AN8**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

**C. Blondell, Marcell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 W Mechanic St  
 Apt 308  
 City Yale State MI Zip Code 48097-3376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 640.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y4V67**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	25.00
<b>TOTAL</b> 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 29 OF 295
	<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. Blondell, Marcell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 W Mechanic St  
 Apt 308  
 City Yale State MI Zip Code 48097-3376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 640.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y4V75**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

**B. Blondell, Marcell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 W Mechanic St  
 Apt 308  
 City Yale State MI Zip Code 48097-3376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 640.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y4V83**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

**C. Blondell, Marcell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 W Mechanic St  
 Apt 308  
 City Yale State MI Zip Code 48097-3376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 640.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y53Y2**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	35.00
<b>TOTAL</b> 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 295
	(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. Blondell, Marcell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 W Mechanic St  
 Apt 308  
 City Yale State MI Zip Code 48097-3376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 640.18

Date of Receipt 02 / 15 / 2021  
**Transaction ID : VR08C10Y5P24**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Blondell, Marcell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 W Mechanic St  
 Apt 308  
 City Yale State MI Zip Code 48097-3376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 640.18

Date of Receipt 02 / 15 / 2021  
**Transaction ID : VR08C10Y5S62**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Blondell, Marcell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 W Mechanic St  
 Apt 308  
 City Yale State MI Zip Code 48097-3376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 640.18

Date of Receipt 02 / 22 / 2021  
**Transaction ID : VR08C111EZX1**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	25.00
<b>TOTAL</b> 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 31 OF 295
	<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. Blondell, Marcell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 W Mechanic St  
 Apt 308  
 City Yale State MI Zip Code 48097-3376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 640.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111EZY9**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**B. Blondell, Marcell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 W Mechanic St  
 Apt 308  
 City Yale State MI Zip Code 48097-3376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 640.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111FG16**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**C. Blondell, Marcell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 W Mechanic St  
 Apt 308  
 City Yale State MI Zip Code 48097-3376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 640.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111FT26**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	20.00
<b>TOTAL</b> 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 32 OF 295
	<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. Blondell, Marcell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 W Mechanic St  
 Apt 308  
 City Yale State MI Zip Code 48097-3376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 640.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111H490**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**B. Blondell, Marcell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 W Mechanic St  
 Apt 308  
 City Yale State MI Zip Code 48097-3376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 640.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111JE58**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

**C. Blondell, Marcell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 W Mechanic St  
 Apt 308  
 City Yale State MI Zip Code 48097-3376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 640.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111JEN4**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	35.00
<b>TOTAL</b> 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 33 OF 295
	<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. Blondell, Marcell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 W Mechanic St  
 Apt 308  
 City Yale State MI Zip Code 48097-3376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 640.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C111ZGPO**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**B. Blondell, Marcell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 W Mechanic St  
 Apt 308  
 City Yale State MI Zip Code 48097-3376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 640.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C111ZGQ7**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**C. Blondell, Marcell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 W Mechanic St  
 Apt 308  
 City Yale State MI Zip Code 48097-3376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 640.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C111ZGR5**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	15.00
<b>TOTAL</b> 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 295
	<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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**A. Blondell, Marcell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 W Mechanic St  
 Apt 308  
 City Yale State MI Zip Code 48097-3376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 640.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C111ZHQ0**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

**B. Blondell, Marcell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 W Mechanic St  
 Apt 308  
 City Yale State MI Zip Code 48097-3376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 640.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C111ZHR8**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

**C. Blondell, Marcell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 W Mechanic St  
 Apt 308  
 City Yale State MI Zip Code 48097-3376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 640.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C111ZMR5**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	30.00
<b>TOTAL</b> 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 35 OF 295
	<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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**Congressional Progressive Caucus PAC**

**A. Blondell, Marcell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 W Mechanic St  
 Apt 308  
 City Yale State MI Zip Code 48097-3376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 640.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C11204Z2**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**B. Blondell, Marcell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 W Mechanic St  
 Apt 308  
 City Yale State MI Zip Code 48097-3376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 640.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C11206A1**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

**C. Blondell, Marcell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 W Mechanic St  
 Apt 308  
 City Yale State MI Zip Code 48097-3376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 640.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1120713**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	20.00
<b>TOTAL</b> 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 36 OF 295
	<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. Blondell, Marcell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 W Mechanic St  
 Apt 308  
 City Yale State MI Zip Code 48097-3376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 640.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1120755**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

**B. Blondell, Marcell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 W Mechanic St  
 Apt 308  
 City Yale State MI Zip Code 48097-3376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 640.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1120720**  
 Amount of Each Receipt this Period  
 2.50  
 Memo Item

**C. Blondell, Marcell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 W Mechanic St  
 Apt 308  
 City Yale State MI Zip Code 48097-3376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 640.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C11209Q0**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	17.50
<b>TOTAL</b> 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 37 OF 295
	<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. Blondell, Marcell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 W Mechanic St  
 Apt 308  
 City Yale State MI Zip Code 48097-3376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 640.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1120AS9**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**B. Blondell, Marcell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 W Mechanic St  
 Apt 308  
 City Yale State MI Zip Code 48097-3376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 640.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1120AT7**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**C. Blondell, Marcell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 W Mechanic St  
 Apt 308  
 City Yale State MI Zip Code 48097-3376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 640.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1120CF4**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	15.00
<b>TOTAL</b> 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 38 OF 295
	<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)  
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**A. Blondell, Marcell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 W Mechanic St  
 Apt 308  
 City Yale State MI Zip Code 48097-3376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 640.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1120CG2**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**B. Blondell, Marcell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 W Mechanic St  
 Apt 308  
 City Yale State MI Zip Code 48097-3376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 640.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1120D32**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**C. Blondell, Marcell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 W Mechanic St  
 Apt 308  
 City Yale State MI Zip Code 48097-3376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 640.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1120HF4**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	15.00
<b>TOTAL</b> 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 39 OF 295
	<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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**Congressional Progressive Caucus PAC**

**A. Blondell, Marcell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 103 W Mechanic St  
Apt 308

City Yale	State MI	Zip Code 48097-3376
--------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
640.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021

**Transaction ID : VR08C1120YC7**

Amount of Each Receipt this Period  
10.00

Memo Item

**B. Blondell, Marcell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 103 W Mechanic St  
Apt 308

City Yale	State MI	Zip Code 48097-3376
--------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
640.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021

**Transaction ID : VR08C1121AT4**

Amount of Each Receipt this Period  
15.00

Memo Item

**C. Blondell, Marcell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 103 W Mechanic St  
Apt 308

City Yale	State MI	Zip Code 48097-3376
--------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
640.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021

**Transaction ID : VR08C1121R98**

Amount of Each Receipt this Period  
10.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	35.00
<b>TOTAL</b> 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 40 OF 295
	<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. Blondell, Marcell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 W Mechanic St  
 Apt 308  
 City Yale State MI Zip Code 48097-3376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 640.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1122V2**  
 Amount of Each Receipt this Period  
 10.09  
 Memo Item

**B. Blondell, Marcell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 W Mechanic St  
 Apt 308  
 City Yale State MI Zip Code 48097-3376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 640.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1122ND2**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**C. Blondell, Marcell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 W Mechanic St  
 Apt 308  
 City Yale State MI Zip Code 48097-3376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 640.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1122NE0**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	20.09
<b>TOTAL</b> 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 41 OF 295
	<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. Blondell, Marcell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 W Mechanic St  
 Apt 308  
 City Yale State MI Zip Code 48097-3376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 640.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1122RS3**  
 Amount of Each Receipt this Period  
 7.50  
 Memo Item

**B. Blondell, Marcell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 W Mechanic St  
 Apt 308  
 City Yale State MI Zip Code 48097-3376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 640.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1122RT1**  
 Amount of Each Receipt this Period  
 7.50  
 Memo Item

**C. Blondell, Marcell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 W Mechanic St  
 Apt 308  
 City Yale State MI Zip Code 48097-3376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 640.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C11231C9**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	25.00
<b>TOTAL</b> 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 42 OF 295
	<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. Blumfelder, Theresa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5121 Tennis Court St W  
 City Las Vegas State NV Zip Code 89120-1345  
 FEC ID number of contributing federal political 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 / 08 / 2021  
**Transaction ID : VR08C10WKP51**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Blumfelder, Theresa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5121 Tennis Court St W  
 City Las Vegas State NV Zip Code 89120-1345  
 FEC ID number of contributing federal political 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 / 22 / 2021  
**Transaction ID : VR08C111FGK8**  
 Amount of Each Receipt this Period 35.00  
 Memo Item

**C. Blumfelder, Theresa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5121 Tennis Court St W  
 City Las Vegas State NV Zip Code 89120-1345  
 FEC ID number of contributing federal political 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 / 22 / 2021  
**Transaction ID : VR08C111FPC6**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	110.00
<b>TOTAL</b> 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 43 OF 295
	<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. Blumfelder, Theresa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5121 Tennis Court St W  
 City Las Vegas State NV Zip Code 89120-1345  
 FEC ID number of contributing federal political 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 / 28 / 2021  
**Transaction ID : VR08C1120ZH0**  
 Amount of Each Receipt this Period 35.00  
 Memo Item

**B. Brainerd, Jack, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 865 Inca Pkwy  
 City Boulder State CO Zip Code 80303-2605  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Luthier  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 02 / 22 / 2021  
**Transaction ID : VR08C111G094**  
 Amount of Each Receipt this Period 1000.00  
 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 ▼ 287.00

Date of Receipt 02 / 08 / 2021  
**Transaction ID : VR08C10WJCE3**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1040.00
<b>TOTAL</b> 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 295
	<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. 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 ▼ 287.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WJNV5**  
 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 ▼ 287.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WK9Y0**  
 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 ▼ 287.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WM4S9**  
 Amount of Each Receipt this Period 6.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	16.00
<b>TOTAL</b> 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 295
	<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. 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 ▼ 287.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WMJV4**  
 Amount of Each Receipt this Period  
 8.00  
 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 ▼ 287.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WMJW2**  
 Amount of Each Receipt this Period  
 8.00  
 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 ▼ 287.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WMJX0**  
 Amount of Each Receipt this Period  
 8.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	24.00
<b>TOTAL</b> 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 46 OF 295
	<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. 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 ▼ 287.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WMJY8**  
 Amount of Each Receipt this Period  
 8.00  
 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 ▼ 287.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WN8D0**  
 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 ▼ 287.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y32A6**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	18.00
<b>TOTAL</b> 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 295
	<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. 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 ▼ 287.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y32B4**  
 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 ▼ 287.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y3ER2**  
 Amount of Each Receipt this Period 10.00  
 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 ▼ 287.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y4552**  
 Amount of Each Receipt this Period 7.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	22.00
<b>TOTAL</b> 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 295
	<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. 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 ▼ 287.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y4WM1**  
 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 ▼ 287.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y51F0**  
 Amount of Each Receipt this Period  
 8.00  
 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 ▼ 287.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y51G8**  
 Amount of Each Receipt this Period  
 8.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	21.00
<b>TOTAL</b> 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 295
	<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)  
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**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 ▼ 287.00

Date of Receipt  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y51K2**  
 Amount of Each Receipt this Period 7.00  
 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 ▼ 287.00

Date of Receipt  
 02 / 22 / 2021  
**Transaction ID : VR08C111G207**  
 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 ▼ 287.00

Date of Receipt  
 02 / 22 / 2021  
**Transaction ID : VR08C111G5Y0**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	17.00
<b>TOTAL</b> 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 295
	<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. 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 ▼ 287.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111HDJ9**  
 Amount of Each Receipt this Period 8.00  
 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 ▼ 287.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111HDK7**  
 Amount of Each Receipt this Period 8.00  
 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 ▼ 287.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1120025**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	21.00
<b>TOTAL</b> 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 51 OF 295
	<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. 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 ▼ 287.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1121277**  
 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 ▼ 287.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1121V45**  
 Amount of Each Receipt this Period 8.00  
 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 ▼ 287.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1121V53**  
 Amount of Each Receipt this Period 7.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	21.00
<b>TOTAL</b> 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 295
	<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 ▼ 287.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1121VE4**  
 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 ▼ 287.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1121YT5**  
 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 ▼ 287.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1122KQ6**  
 Amount of Each Receipt this Period 4.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	15.00
<b>TOTAL</b> 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 53 OF 295
	<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. Canzanelli, Carl, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4131 Spring Is  
 City Okatie State SC Zip Code 29909-4041  
 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 ▼ 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y2AM7**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**B. Canzanelli, Carl, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4131 Spring Is  
 City Okatie State SC Zip Code 29909-4041  
 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 ▼ 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y4D01**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**C. Canzanelli, Carl, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4131 Spring Is  
 City Okatie State SC Zip Code 29909-4041  
 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 ▼ 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y4XA1**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	45.00
<b>TOTAL</b> 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 295
	<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. Canzanelli, Carl, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4131 Spring Is  
 City Okatie State SC Zip Code 29909-4041  
 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 ▼ 205.00

Date of Receipt 02 / 15 / 2021  
**Transaction ID : VR08C10Y4XB9**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**B. Canzanelli, Carl, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4131 Spring Is  
 City Okatie State SC Zip Code 29909-4041  
 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 ▼ 205.00

Date of Receipt 02 / 15 / 2021  
**Transaction ID : VR08C10Y4Z32**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**C. Canzanelli, Carl, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4131 Spring Is  
 City Okatie State SC Zip Code 29909-4041  
 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 ▼ 205.00

Date of Receipt 02 / 22 / 2021  
**Transaction ID : VR08C111GS63**  
 Amount of Each Receipt this Period 10.00  
 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 55 OF 295
	(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. Canzanelli, Carl, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4131 Spring Is  
 City Okatie State SC Zip Code 29909-4041  
 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 ▼ 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111HMR2**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**B. Canzanelli, Carl, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4131 Spring Is  
 City Okatie State SC Zip Code 29909-4041  
 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 ▼ 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111HMS0**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**C. Canzanelli, Carl, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4131 Spring Is  
 City Okatie State SC Zip Code 29909-4041  
 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 ▼ 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111HMT8**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	45.00
<b>TOTAL</b> 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 56 OF 295
	<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. Combs, Phyllis, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 824 Lisburn Rd  
 Apt 623  
 City Camp Hill State PA Zip Code 17011-7101  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2158.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y2DA4**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**B. Combs, Phyllis, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 824 Lisburn Rd  
 Apt 623  
 City Camp Hill State PA Zip Code 17011-7101  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2158.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y3N58**  
 Amount of Each Receipt this Period  
 4.00  
 Memo Item

**C. Combs, Phyllis, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 824 Lisburn Rd  
 Apt 623  
 City Camp Hill State PA Zip Code 17011-7101  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2158.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C111ZA78**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1009.00
<b>TOTAL</b> 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 57 OF 295
	<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. Combs, Phyllis, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 824 Lisburn Rd  
 Apt 623  
 City Camp Hill State PA Zip Code 17011-7101  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2158.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C111ZCQ8**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**B. Combs, Phyllis, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 824 Lisburn Rd  
 Apt 623  
 City Camp Hill State PA Zip Code 17011-7101  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2158.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C111ZCR6**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**C. Combs, Phyllis, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 824 Lisburn Rd  
 Apt 623  
 City Camp Hill State PA Zip Code 17011-7101  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2158.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C111ZCS4**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	45.00
<b>TOTAL</b> 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 58 OF 295
	<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. Combs, Phyllis, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 824 Lisburn Rd  
 Apt 623  
 City Camp Hill State PA Zip Code 17011-7101  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2158.00

Date of Receipt **02 / 28 / 2021**  
**Transaction ID : VR08C1122XF3**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Cooper, Carolyn, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2839 NW 56Th St  
 Apt 407  
 City Seattle State WA Zip Code 98107-4285  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt **02 / 08 / 2021**  
**Transaction ID : VR08C10WKX31**  
 Amount of Each Receipt this Period 35.00  
 Memo Item

**C. Cooper, Carolyn, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2839 NW 56Th St  
 Apt 407  
 City Seattle State WA Zip Code 98107-4285  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt **02 / 08 / 2021**  
**Transaction ID : VR08C10WM655**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	110.00
<b>TOTAL</b> 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 295
	(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. Cooper, Carolyn, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2839 NW 56Th St  
 Apt 407  
 City Seattle State WA Zip Code 98107-4285  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WM663**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**B. Cooper, Carolyn, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2839 NW 56Th St  
 Apt 407  
 City Seattle State WA Zip Code 98107-4285  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y48B5**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**C. Cooper, Carolyn, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2839 NW 56Th St  
 Apt 407  
 City Seattle State WA Zip Code 98107-4285  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y49H6**  
 Amount of Each Receipt this Period  
 35.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	100.00
<b>TOTAL</b> 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 60 OF 295
	<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. Cooper, Carolyn, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2839 NW 56Th St  
 Apt 407  
 City Seattle State WA Zip Code 98107-4285  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111GKK3**  
 Amount of Each Receipt this Period  
 35.00  
 Memo Item

**B. Cooper, Carolyn, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2839 NW 56Th St  
 Apt 407  
 City Seattle State WA Zip Code 98107-4285  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111GTY4**  
 Amount of Each Receipt this Period  
 20.00  
 Memo Item

**C. Cooper, Carolyn, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2839 NW 56Th St  
 Apt 407  
 City Seattle State WA Zip Code 98107-4285  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111GTZ2**  
 Amount of Each Receipt this Period  
 20.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	75.00
<b>TOTAL</b> 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 295
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A. Cooper, Carolyn, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2839 NW 56Th St  
 Apt 407  
 City Seattle State WA Zip Code 98107-4285  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111HST8**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**B. Cooper, Carolyn, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2839 NW 56Th St  
 Apt 407  
 City Seattle State WA Zip Code 98107-4285  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111HSV6**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**C. Cooper, Carolyn, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2839 NW 56Th St  
 Apt 407  
 City Seattle State WA Zip Code 98107-4285  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1120ZP9**  
 Amount of Each Receipt this Period  
 35.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	65.00
<b>TOTAL</b> 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 295
	<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. Cooper, Carolyn, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2839 NW 56Th St  
 Apt 407  
 City Seattle State WA Zip Code 98107-4285  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C11212H6**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**B. Cooper, Carolyn, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2839 NW 56Th St  
 Apt 407  
 City Seattle State WA Zip Code 98107-4285  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C11212J4**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**C. Cooper, Carolyn, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2839 NW 56Th St  
 Apt 407  
 City Seattle State WA Zip Code 98107-4285  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C11212K2**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	45.00
<b>TOTAL</b> 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 63 OF 295
	<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. Cooper, Carolyn, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2839 NW 56Th St  
 Apt 407  
 City Seattle State WA Zip Code 98107-4285  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **485.00**

Date of Receipt **02 / 28 / 2021**  
**Transaction ID : VR08C11216V4**  
 Amount of Each Receipt this Period **15.00**  
 Memo Item

**B. Cooper, Carolyn, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2839 NW 56Th St  
 Apt 407  
 City Seattle State WA Zip Code 98107-4285  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **485.00**

Date of Receipt **02 / 28 / 2021**  
**Transaction ID : VR08C11216W2**  
 Amount of Each Receipt this Period **15.00**  
 Memo Item

**C. Copeland, Donald, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 238 Moore Ave  
 City Buffalo State NY Zip Code 14223-1617  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **15.00**

Date of Receipt **02 / 15 / 2021**  
**Transaction ID : VR08C10Y2EB5**  
 Amount of Each Receipt this Period **250.00**  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>280.00</b>
<b>TOTAL</b> 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 64 OF 295
	<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. Copeland, Donald, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 238 Moore Ave  
 City Buffalo State NY Zip Code 14223-1617  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 15.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y2F56**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**B. Dellafiora, Sandra, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 23 Wildwood Pl  
 City El Cerrito State CA Zip Code 94530-2048  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 209.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WNGN2**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**C. Dellafiora, Sandra, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 23 Wildwood Pl  
 City El Cerrito State CA Zip Code 94530-2048  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 209.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y5KX9**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	45.00
<b>TOTAL</b> 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 295
	(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. Dellafiora, Sandra, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 23 Wildwood Pl  
 City El Cerrito State CA Zip Code 94530-2048  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 209.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y5MV6**  
 Amount of Each Receipt this Period  
 35.00  
 Memo Item

**B. Dellafiora, Sandra, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 23 Wildwood Pl  
 City El Cerrito State CA Zip Code 94530-2048  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 209.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111JFB8**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**C. Dellafiora, Sandra, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 23 Wildwood Pl  
 City El Cerrito State CA Zip Code 94530-2048  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 209.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1122PJ3**  
 Amount of Each Receipt this Period  
 7.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	67.00
<b>TOTAL</b> 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 295
	(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. Down, Anne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 578 Cresta Vista Ln  
 City Portola Valley State CA Zip Code 94028-7729  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WKXZ2**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**B. Engebretsen, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1675 S Fiske Blvd Apt 241J  
 City Rockledge State FL Zip Code 32955-2534  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WJFD2**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**C. Engebretsen, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1675 S Fiske Blvd Apt 241J  
 City Rockledge State FL Zip Code 32955-2534  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WJH44**  
 Amount of Each Receipt this Period  
 3.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	508.00
<b>TOTAL</b> 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 295
	<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. Engebretsen, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1675 S Fiske Blvd  
 Apt 241J  
 City Rockledge State FL Zip Code 32955-2534  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WJH52**  
 Amount of Each Receipt this Period  
 3.00  
 Memo Item

**B. Engebretsen, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1675 S Fiske Blvd  
 Apt 241J  
 City Rockledge State FL Zip Code 32955-2534  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WJKH3**  
 Amount of Each Receipt this Period  
 3.00  
 Memo Item

**C. Engebretsen, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1675 S Fiske Blvd  
 Apt 241J  
 City Rockledge State FL Zip Code 32955-2534  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WJKJ1**  
 Amount of Each Receipt this Period  
 3.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	9.00
<b>TOTAL</b> 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 68 OF 295
	<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. Engebretsen, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1675 S Fiske Blvd  
 Apt 241J  
 City Rockledge State FL Zip Code 32955-2534  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WJJK8**  
 Amount of Each Receipt this Period  
 3.00  
 Memo Item

**B. Engebretsen, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1675 S Fiske Blvd  
 Apt 241J  
 City Rockledge State FL Zip Code 32955-2534  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WJKM6**  
 Amount of Each Receipt this Period  
 3.00  
 Memo Item

**C. Engebretsen, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1675 S Fiske Blvd  
 Apt 241J  
 City Rockledge State FL Zip Code 32955-2534  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WJKN4**  
 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)..... ▶

9.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 295
	<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. Engebretsen, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1675 S Fiske Blvd  
 Apt 241J  
 City Rockledge State FL Zip Code 32955-2534  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WJN93**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**B. Engebretsen, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1675 S Fiske Blvd  
 Apt 241J  
 City Rockledge State FL Zip Code 32955-2534  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WJNE3**  
 Amount of Each Receipt this Period  
 3.00  
 Memo Item

**C. Engebretsen, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1675 S Fiske Blvd  
 Apt 241J  
 City Rockledge State FL Zip Code 32955-2534  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WM485**  
 Amount of Each Receipt this Period  
 2.50  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10.50
<b>TOTAL</b> 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 70 OF 295
	<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. Engebretsen, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1675 S Fiske Blvd  
 Apt 241J  
 City Rockledge State FL Zip Code 32955-2534  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WN1M3**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**B. Engebretsen, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1675 S Fiske Blvd  
 Apt 241J  
 City Rockledge State FL Zip Code 32955-2534  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WNGB3**  
 Amount of Each Receipt this Period  
 3.00  
 Memo Item

**C. Engebretsen, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1675 S Fiske Blvd  
 Apt 241J  
 City Rockledge State FL Zip Code 32955-2534  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WNSY2**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	13.00
<b>TOTAL</b> 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 71 OF 295
	<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. Engebretsen, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1675 S Fiske Blvd  
 Apt 241J  
 City Rockledge State FL Zip Code 32955-2534  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt 02 / 08 / 2021  
**Transaction ID : VR08C10WNTM6**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**B. Engebretsen, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1675 S Fiske Blvd  
 Apt 241J  
 City Rockledge State FL Zip Code 32955-2534  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt 02 / 08 / 2021  
**Transaction ID : VR08C10WNXS2**  
 Amount of Each Receipt this Period 3.00  
 Memo Item

**C. Engebretsen, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1675 S Fiske Blvd  
 Apt 241J  
 City Rockledge State FL Zip Code 32955-2534  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt 02 / 08 / 2021  
**Transaction ID : VR08C10WNXT0**  
 Amount of Each Receipt this Period 3.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	11.00
<b>TOTAL</b> 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 72 OF 295
	<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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Engebretsen, David, , ,**

Mailing Address 1675 S Fiske Blvd  
Apt 241J

City Rockledge State FL Zip Code 32955-2534

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
301.00

Date of Receipt  
02 / 15 / 2021  
**Transaction ID : VR08C10Y26E0**

Amount of Each Receipt this Period  
15.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Engebretsen, David, , ,**

Mailing Address 1675 S Fiske Blvd  
Apt 241J

City Rockledge State FL Zip Code 32955-2534

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
301.00

Date of Receipt  
02 / 15 / 2021  
**Transaction ID : VR08C10Y27P6**

Amount of Each Receipt this Period  
5.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Engebretsen, David, , ,**

Mailing Address 1675 S Fiske Blvd  
Apt 241J

City Rockledge State FL Zip Code 32955-2534

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
301.00

Date of Receipt  
02 / 15 / 2021  
**Transaction ID : VR08C10Y3XN3**

Amount of Each Receipt this Period  
2.50

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	22.50
<b>TOTAL</b> 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 295
	<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. Engebretsen, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1675 S Fiske Blvd  
Apt 241J

City Rockledge	State FL	Zip Code 32955-2534
-------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021

**Transaction ID : VR08C10Y56Q3**

Amount of Each Receipt this Period  
3.00

Memo Item

**B. Engebretsen, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1675 S Fiske Blvd  
Apt 241J

City Rockledge	State FL	Zip Code 32955-2534
-------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021

**Transaction ID : VR08C10Y56R1**

Amount of Each Receipt this Period  
3.00

Memo Item

**C. Engebretsen, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1675 S Fiske Blvd  
Apt 241J

City Rockledge	State FL	Zip Code 32955-2534
-------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021

**Transaction ID : VR08C10Y5KM8**

Amount of Each Receipt this Period  
15.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	21.00
<b>TOTAL</b> 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 74 OF 295
	<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. Engebretsen, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1675 S Fiske Blvd  
 Apt 241J  
 City Rockledge State FL Zip Code 32955-2534  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt **02 / 22 / 2021**  
**Transaction ID : VR08C111G9H6**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**B. Engebretsen, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1675 S Fiske Blvd  
 Apt 241J  
 City Rockledge State FL Zip Code 32955-2534  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt **02 / 28 / 2021**  
**Transaction ID : VR08C111ZHN4**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Engebretsen, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1675 S Fiske Blvd  
 Apt 241J  
 City Rockledge State FL Zip Code 32955-2534  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt **02 / 28 / 2021**  
**Transaction ID : VR08C111ZHZ3**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	20.00
<b>TOTAL</b> 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 75 OF 295
	(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. Engebretsen, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1675 S Fiske Blvd  
 Apt 241J  
 City Rockledge State FL Zip Code 32955-2534  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C111ZJ01**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**B. Engebretsen, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1675 S Fiske Blvd  
 Apt 241J  
 City Rockledge State FL Zip Code 32955-2534  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1120C55**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**C. Engebretsen, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1675 S Fiske Blvd  
 Apt 241J  
 City Rockledge State FL Zip Code 32955-2534  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1122MW8**  
 Amount of Each Receipt this Period  
 3.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	23.00
<b>TOTAL</b> 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 76 OF 295
	<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. Ferrenz, Mark, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 224 Sherman Rd  
 City Chestnut Hill State MA Zip Code 02467-3180  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 505.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C111ZPZ3**  
 Amount of Each Receipt this Period  
 505.00  
 Memo Item

**B. Fielder, Betty, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 37 Pond Shore Dr  
 City Charlestown State RI Zip Code 02813-1941  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 286.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WKP92**  
 Amount of Each Receipt this Period  
 3.00  
 Memo Item

**C. Fielder, Betty, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 37 Pond Shore Dr  
 City Charlestown State RI Zip Code 02813-1941  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 286.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WNCA6**  
 Amount of Each Receipt this Period  
 3.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	511.00
<b>TOTAL</b> 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 77 OF 295
	<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. Fielder, Betty, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 37 Pond Shore Dr  
 City Charlestown State RI Zip Code 02813-1941  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 286.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WNSM3**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**B. Fielder, Betty, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 37 Pond Shore Dr  
 City Charlestown State RI Zip Code 02813-1941  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 286.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WNSN1**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**C. Fielder, Betty, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 37 Pond Shore Dr  
 City Charlestown State RI Zip Code 02813-1941  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 286.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y2813**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	15.00
<b>TOTAL</b> 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 78 OF 295
	<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. Fielder, Betty, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 37 Pond Shore Dr  
 City Charlestown State RI Zip Code 02813-1941  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 286.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y3BR6**  
 Amount of Each Receipt this Period 3.50  
 Memo Item

**B. Fielder, Betty, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 37 Pond Shore Dr  
 City Charlestown State RI Zip Code 02813-1941  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 286.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y3C41**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**C. Fielder, Betty, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 37 Pond Shore Dr  
 City Charlestown State RI Zip Code 02813-1941  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 286.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y3YQ8**  
 Amount of Each Receipt this Period 6.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	14.50
<b>TOTAL</b> 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 79 OF 295
	<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. Fielder, Betty, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 37 Pond Shore Dr  
 City Charlestown State RI Zip Code 02813-1941  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 286.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y5RW3**  
 Amount of Each Receipt this Period  
 6.00  
 Memo Item

**B. Fielder, Betty, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 37 Pond Shore Dr  
 City Charlestown State RI Zip Code 02813-1941  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 286.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y5TA5**  
 Amount of Each Receipt this Period  
 4.00  
 Memo Item

**C. Fielder, Betty, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 37 Pond Shore Dr  
 City Charlestown State RI Zip Code 02813-1941  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 286.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111GFS1**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	15.00
<b>TOTAL</b> 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 80 OF 295
	<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. Fielder, Betty, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 37 Pond Shore Dr  
 City Charlestown State RI Zip Code 02813-1941  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 286.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111GHA7**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**B. Fielder, Betty, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 37 Pond Shore Dr  
 City Charlestown State RI Zip Code 02813-1941  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 286.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111GJW2**  
 Amount of Each Receipt this Period 7.00  
 Memo Item

**C. Fielder, Betty, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 37 Pond Shore Dr  
 City Charlestown State RI Zip Code 02813-1941  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 286.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111JCY0**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	27.00
<b>TOTAL</b> 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 81 OF 295
	<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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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. Fielder, Betty, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 37 Pond Shore Dr  
 City Charlestown State RI Zip Code 02813-1941  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 286.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111JH62**  
 Amount of Each Receipt this Period 7.00  
 Memo Item

**B. Fielder, Betty, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 37 Pond Shore Dr  
 City Charlestown State RI Zip Code 02813-1941  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 286.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111JPK5**  
 Amount of Each Receipt this Period 6.00  
 Memo Item

**C. Fielder, Betty, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 37 Pond Shore Dr  
 City Charlestown State RI Zip Code 02813-1941  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 286.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C111Z7N2**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	18.00
<b>TOTAL</b> 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 82 OF 295
	<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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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. Fielder, Betty, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 37 Pond Shore Dr  
 City Charlestown State RI Zip Code 02813-1941  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 286.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C11207J7**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**B. Fielder, Betty, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 37 Pond Shore Dr  
 City Charlestown State RI Zip Code 02813-1941  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 286.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1120CE6**  
 Amount of Each Receipt this Period  
 7.00  
 Memo Item

**C. Fielder, Betty, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 37 Pond Shore Dr  
 City Charlestown State RI Zip Code 02813-1941  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 286.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1120GS2**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	17.00
<b>TOTAL</b> 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 83 OF 295
	<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. Fielder, Betty, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 37 Pond Shore Dr

City Charlestown	State RI	Zip Code 02813-1941
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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
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
286.50

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2021

**Transaction ID : VR08C1121CP8**

Amount of Each Receipt this Period  
5.00

Memo Item

**B. Fielder, Betty, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 37 Pond Shore Dr

City Charlestown	State RI	Zip Code 02813-1941
---------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
286.50

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2021

**Transaction ID : VR08C1122NH4**

Amount of Each Receipt this Period  
5.00

Memo Item

**C. Fielder, Betty, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 37 Pond Shore Dr

City Charlestown	State RI	Zip Code 02813-1941
---------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
286.50

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2021

**Transaction ID : VR08C1122Y31**

Amount of Each Receipt this Period  
15.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	25.00
<b>TOTAL</b> 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 295
	<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. Fielder, Betty, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 37 Pond Shore Dr  
 City Charlestown State RI Zip Code 02813-1941  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **286.50**

Date of Receipt **02 / 28 / 2021**  
**Transaction ID : VR08C1122Y49**  
 Amount of Each Receipt this Period **15.00**  
 Memo Item

**B. Foster, MaryAnn, Justine, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7 Greenleaf Ln  
 City Cotati State CA Zip Code 94931-4004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **231.00**

Date of Receipt **02 / 08 / 2021**  
**Transaction ID : VR08C10WJE80**  
 Amount of Each Receipt this Period **30.00**  
 Memo Item

**C. Foster, MaryAnn, Justine, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7 Greenleaf Ln  
 City Cotati State CA Zip Code 94931-4004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **231.00**

Date of Receipt **02 / 08 / 2021**  
**Transaction ID : VR08C10WJJV9**  
 Amount of Each Receipt this Period **5.00**  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>50.00</b>
<b>TOTAL</b> 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 85 OF 295
	<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. Foster, MaryAnn, Justine, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7 Greenleaf Ln  
 City Cotati State CA Zip Code 94931-4004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WJJW7**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**B. Foster, MaryAnn, Justine, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7 Greenleaf Ln  
 City Cotati State CA Zip Code 94931-4004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WM1B3**  
 Amount of Each Receipt this Period  
 30.00  
 Memo Item

**C. Foster, MaryAnn, Justine, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7 Greenleaf Ln  
 City Cotati State CA Zip Code 94931-4004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WM884**  
 Amount of Each Receipt this Period  
 35.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	70.00
<b>TOTAL</b> 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 86 OF 295
	<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. Foster, MaryAnn, Justine, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7 Greenleaf Ln  
 City Cotati State CA Zip Code 94931-4004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WM892**  
 Amount of Each Receipt this Period  
 35.00  
 Memo Item

**B. Foster, MaryAnn, Justine, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7 Greenleaf Ln  
 City Cotati State CA Zip Code 94931-4004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WM8A0**  
 Amount of Each Receipt this Period  
 35.00  
 Memo Item

**C. Foster, MaryAnn, Justine, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7 Greenleaf Ln  
 City Cotati State CA Zip Code 94931-4004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WNAM1**  
 Amount of Each Receipt this Period  
 3.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	73.00
<b>TOTAL</b> 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 295
	<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. Foster, MaryAnn, Justine, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7 Greenleaf Ln  
 City Cotati State CA Zip Code 94931-4004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt 02 / 08 / 2021  
**Transaction ID : VR08C10WNAN9**  
 Amount of Each Receipt this Period 3.00  
 Memo Item

**B. Galt, 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 / 22 / 2021  
**Transaction ID : VR08C111GRS1**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**C. Galt, 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 / 28 / 2021  
**Transaction ID : VR08C1120H07**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	118.00
<b>TOTAL</b> 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 295
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A. Goldman, Lawrence, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 51 Pecksland Rd

City Greenwich	State CT	Zip Code 06831-3711
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Malman&Goldman LLP Self	Occupation (for Individual) Attorney
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
245.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2021

**Transaction ID : VR08C10WJN10**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. Goldman, Lawrence, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 51 Pecksland Rd

City Greenwich	State CT	Zip Code 06831-3711
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Malman&Goldman LLP Self	Occupation (for Individual) Attorney
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
245.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2021

**Transaction ID : VR08C10WKVE4**

Amount of Each Receipt this Period  
35.00

Memo Item

**C. Goldman, Lawrence, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 51 Pecksland Rd

City Greenwich	State CT	Zip Code 06831-3711
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Malman&Goldman LLP Self	Occupation (for Individual) Attorney
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
245.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02		22		2021

**Transaction ID : VR08C111G155**

Amount of Each Receipt this Period  
5.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	90.00
<b>TOTAL</b> 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 295
	<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. Goldman, Lawrence, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 51 Pecksland Rd  
 City Greenwich State CT Zip Code 06831-3711  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Malman&Goldman LLP Self Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111GFG0**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**B. Goldsmith, Gail, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 82 Forsyth St  
 City New York State NY Zip Code 10002-5129  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1403.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WKE70**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**C. Goldsmith, Gail, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 82 Forsyth St  
 City New York State NY Zip Code 10002-5129  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1403.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WM9J4**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	25.00
<b>TOTAL</b> 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 295
	<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. Goldsmith, Gail, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 82 Forsyth St

City New York	State NY	Zip Code 10002-5129
------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1403.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2021

**Transaction ID : VR08C10WNRW3**

Amount of Each Receipt this Period  
15.00

Memo Item

**B. Goldsmith, Gail, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 82 Forsyth St

City New York	State NY	Zip Code 10002-5129
------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1403.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02		15		2021

**Transaction ID : VR08C10Y32W8**

Amount of Each Receipt this Period  
5.00

Memo Item

**C. Goldsmith, Gail, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 82 Forsyth St

City New York	State NY	Zip Code 10002-5129
------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1403.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02		15		2021

**Transaction ID : VR08C10Y4SC1**

Amount of Each Receipt this Period  
10.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	30.00
<b>TOTAL</b> 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 295
	<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. Goldsmith, Gail, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 82 Forsyth St  
 City New York State NY Zip Code 10002-5129  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1403.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111EYY6**  
 Amount of Each Receipt this Period  
 1200.00  
 Memo Item

**B. Goldsmith, Gail, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 82 Forsyth St  
 City New York State NY Zip Code 10002-5129  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1403.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111FX07**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**C. Goldsmith, Gail, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 82 Forsyth St  
 City New York State NY Zip Code 10002-5129  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1403.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111GRX2**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1215.00
<b>TOTAL</b> 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 295
	<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. Goldsmith, Gail, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 82 Forsyth St  
 City New York State NY Zip Code 10002-5129  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1403.00

Date of Receipt  
 02 / 22 / 2021  
**Transaction ID : VR08C111HFY0**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Goldsmith, Gail, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 82 Forsyth St  
 City New York State NY Zip Code 10002-5129  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1403.00

Date of Receipt  
 02 / 28 / 2021  
**Transaction ID : VR08C1121R07**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Gorbet, Larry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9411 W State Route 163  
 City Oak Harbor State OH Zip Code 43449-9604  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 241.08

Date of Receipt  
 02 / 08 / 2021  
**Transaction ID : VR08C10WJJ63**  
 Amount of Each Receipt this Period 11.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	31.00
<b>TOTAL</b> 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 295
	<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. Gorbet, Larry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9411 W State Route 163

City Oak Harbor	State OH	Zip Code 43449-9604
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
241.08

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WJJ97**

Amount of Each Receipt this Period  
5.68

Memo Item

**B. Gorbet, Larry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9411 W State Route 163

City Oak Harbor	State OH	Zip Code 43449-9604
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
241.08

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WJJZ0**

Amount of Each Receipt this Period  
5.00

Memo Item

**C. Gorbet, Larry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9411 W State Route 163

City Oak Harbor	State OH	Zip Code 43449-9604
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
241.08

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WKWE5**

Amount of Each Receipt this Period  
4.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	14.68
<b>TOTAL</b> 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 94 OF 295
	<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. Gorbet, Larry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9411 W State Route 163  
 City Oak Harbor State OH Zip Code 43449-9604  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 241.08

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WNJJ2**  
 Amount of Each Receipt this Period 1.32  
 Memo Item

**B. Gorbet, Larry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9411 W State Route 163  
 City Oak Harbor State OH Zip Code 43449-9604  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 241.08

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WNWFO**  
 Amount of Each Receipt this Period 4.32  
 Memo Item

**C. Gorbet, Larry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9411 W State Route 163  
 City Oak Harbor State OH Zip Code 43449-9604  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 241.08

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y2KY3**  
 Amount of Each Receipt this Period 4.22  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	9.86
<b>TOTAL</b> 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 95 OF 295
	<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. Gorbet, Larry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9411 W State Route 163

City Oak Harbor	State OH	Zip Code 43449-9604
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
241.08

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y4M46**

Amount of Each Receipt this Period  
 15.00

Memo Item

**B. Gorbet, Larry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9411 W State Route 163

City Oak Harbor	State OH	Zip Code 43449-9604
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
241.08

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111F6R7**

Amount of Each Receipt this Period  
 12.10

Memo Item

**C. Gorbet, Larry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9411 W State Route 163

City Oak Harbor	State OH	Zip Code 43449-9604
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
241.08

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111FAR6**

Amount of Each Receipt this Period  
 4.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	31.10
<b>TOTAL</b> 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 96 OF 295
	<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. Gorbet, Larry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9411 W State Route 163

City Oak Harbor	State OH	Zip Code 43449-9604
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
241.08

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111JGY9**

Amount of Each Receipt this Period  
 6.22

Memo Item

**B. Gorbet, Larry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9411 W State Route 163

City Oak Harbor	State OH	Zip Code 43449-9604
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
241.08

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C111ZBC1**

Amount of Each Receipt this Period  
 4.22

Memo Item

**C. Gorbet, Larry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9411 W State Route 163

City Oak Harbor	State OH	Zip Code 43449-9604
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
241.08

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C111ZBE6**

Amount of Each Receipt this Period  
 3.10

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	13.54
<b>TOTAL</b> 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 97 OF 295
	<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. Gorbet, Larry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9411 W State Route 163  
 City Oak Harbor State OH Zip Code 43449-9604  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 241.08

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C111ZD33**  
 Amount of Each Receipt this Period  
 6.12  
 Memo Item

**B. Gorbet, Larry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9411 W State Route 163  
 City Oak Harbor State OH Zip Code 43449-9604  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 241.08

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C111ZGY3**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**C. Gorbet, Larry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9411 W State Route 163  
 City Oak Harbor State OH Zip Code 43449-9604  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 241.08

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C111ZJC4**  
 Amount of Each Receipt this Period  
 5.01  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	16.13
<b>TOTAL</b> 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 98 OF 295
	<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. Gorbet, Larry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9411 W State Route 163

City Oak Harbor	State OH	Zip Code 43449-9604
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
241.08

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C111ZXK4**

Amount of Each Receipt this Period  
 5.40

Memo Item

**B. Gorbet, Larry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9411 W State Route 163

City Oak Harbor	State OH	Zip Code 43449-9604
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
241.08

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1120E76**

Amount of Each Receipt this Period  
 4.00

Memo Item

**C. Gorbet, Larry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9411 W State Route 163

City Oak Harbor	State OH	Zip Code 43449-9604
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
241.08

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1120F77**

Amount of Each Receipt this Period  
 5.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	14.40
<b>TOTAL</b> 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 99 OF 295
	<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. Gorbet, Larry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9411 W State Route 163

City Oak Harbor	State OH	Zip Code 43449-9604
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
241.08

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021

**Transaction ID : VR08C1120HS3**

Amount of Each Receipt this Period  
 2.00

Memo Item

**B. Gorbet, Larry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9411 W State Route 163

City Oak Harbor	State OH	Zip Code 43449-9604
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
241.08

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021

**Transaction ID : VR08C1120HT1**

Amount of Each Receipt this Period  
 2.00

Memo Item

**C. Gorbet, Larry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9411 W State Route 163

City Oak Harbor	State OH	Zip Code 43449-9604
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
241.08

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021

**Transaction ID : VR08C1121SK0**

Amount of Each Receipt this Period  
 5.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	9.00
<b>TOTAL</b> 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 100 OF 295
	<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. Gorbet, Larry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9411 W State Route 163  
 City Oak Harbor State OH Zip Code 43449-9604  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 241.08

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C11226A7**  
 Amount of Each Receipt this Period 1.12  
 Memo Item

**B. Gorbet, Larry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9411 W State Route 163  
 City Oak Harbor State OH Zip Code 43449-9604  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 241.08

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1122N59**  
 Amount of Each Receipt this Period 4.85  
 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 ▼ 444.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WKPB8**  
 Amount of Each Receipt this Period 2.50  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	8.47
<b>TOTAL</b> 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 101 OF 295
	<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. 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 ▼ 444.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WKPD4**  
 Amount of Each Receipt this Period 1.00  
 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 ▼ 444.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WNS62**  
 Amount of Each Receipt this Period 50.00  
 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 ▼ 444.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WNT49**  
 Amount of Each Receipt this Period 7.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	58.00
<b>TOTAL</b> 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 295
	<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. 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 ▼ 444.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WNV09**  
 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 ▼ 444.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y3N24**  
 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 ▼ 444.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y4EG8**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	45.00
<b>TOTAL</b> 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 295
	<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. 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 ▼  
444.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	15	/	2021

**Transaction ID : VR08C10Y53M3**

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 ▼  
444.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	15	/	2021

**Transaction ID : VR08C10Y5N71**

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 ▼  
444.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	15	/	2021

**Transaction ID : VR08C10Y5PN2**

Amount of Each Receipt this Period  
15.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	35.00
<b>TOTAL</b> 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 295  
(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 ▼ **444.00**

Date of Receipt  
**02 / 15 / 2021**

**Transaction ID : VR08C10Y5QX8**

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 ▼ **444.00**

Date of Receipt  
**02 / 15 / 2021**

**Transaction ID : VR08C10Y5QY6**

Amount of Each Receipt this Period  
**5.00**

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 ▼ **444.00**

Date of Receipt  
**02 / 22 / 2021**

**Transaction ID : VR08C111HDP1**

Amount of Each Receipt this Period  
**7.00**

Memo Item

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

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

**17.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 295
	<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. 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 ▼ 444.00

Date of Receipt  
 02 / 22 / 2021  
**Transaction ID : VR08C111J807**  
 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 ▼ 444.00

Date of Receipt  
 02 / 22 / 2021  
**Transaction ID : VR08C111JES6**  
 Amount of Each Receipt this Period 10.00  
 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 ▼ 444.00

Date of Receipt  
 02 / 22 / 2021  
**Transaction ID : VR08C111JGW3**  
 Amount of Each Receipt this Period 7.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	22.00
<b>TOTAL</b> 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 106 OF 295
	<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. 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 ▼ 444.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111JQF6**  
 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 ▼ 444.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C111ZDZ4**  
 Amount of Each Receipt this Period  
 7.00  
 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 ▼ 444.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C111ZJW1**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	27.00
<b>TOTAL</b> 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 107 OF 295
	<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 ▼ 444.00

Date of Receipt  
 02 / 28 / 2021  
**Transaction ID : VR08C1120C70**  
 Amount of Each Receipt this Period 3.00  
 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 ▼ 444.00

Date of Receipt  
 02 / 28 / 2021  
**Transaction ID : VR08C1122G15**  
 Amount of Each Receipt this Period 3.00  
 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 ▼ 444.00

Date of Receipt  
 02 / 28 / 2021  
**Transaction ID : VR08C1122RV9**  
 Amount of Each Receipt this Period 7.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	13.00
<b>TOTAL</b> 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 108 OF 295
	<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. 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 ▼ 444.00

Date of Receipt 02 / 28 / 2021  
**Transaction ID : VR08C1122RZ1**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**B. Greenfield, Kelly, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11411 No 114Th Apt 320  
 City Phoenix State AZ Zip Code 85259  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 02 / 08 / 2021  
**Transaction ID : VR08C10WKY00**  
 Amount of Each Receipt this Period 300.00  
 Memo Item

**C. Gutheil, Thomas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6 Wellman St  
 City Brookline State MA Zip Code 02446-2831  
 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 ▼ 384.00

Date of Receipt 02 / 08 / 2021  
**Transaction ID : VR08C10WM340**  
 Amount of Each Receipt this Period 3.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	308.00
<b>TOTAL</b> 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 109 OF 295
	<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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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. Gutheil, Thomas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6 Wellman St  
 City Brookline State MA Zip Code 02446-2831  
 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 ▼ 384.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y29E7**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**B. Gutheil, Thomas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6 Wellman St  
 City Brookline State MA Zip Code 02446-2831  
 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 ▼ 384.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y29Q63**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**C. Gutheil, Thomas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6 Wellman St  
 City Brookline State MA Zip Code 02446-2831  
 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 ▼ 384.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y3WJ6**  
 Amount of Each Receipt this Period 3.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	13.00
<b>TOTAL</b> 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 110 OF 295
	<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. Gutheil, Thomas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6 Wellman St  
 City Brookline State MA Zip Code 02446-2831  
 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 ▼ 384.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y5CZ9**  
 Amount of Each Receipt this Period 3.00  
 Memo Item

**B. Gutheil, Thomas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6 Wellman St  
 City Brookline State MA Zip Code 02446-2831  
 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 ▼ 384.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y5JN5**  
 Amount of Each Receipt this Period 3.00  
 Memo Item

**C. Gutheil, Thomas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6 Wellman St  
 City Brookline State MA Zip Code 02446-2831  
 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 ▼ 384.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111FNV1**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	11.00
<b>TOTAL</b> 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 111 OF 295
	<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. Gutheil, Thomas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6 Wellman St  
 City Brookline State MA Zip Code 02446-2831  
 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 ▼ 384.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111G171**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**B. Gutheil, Thomas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6 Wellman St  
 City Brookline State MA Zip Code 02446-2831  
 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 ▼ 384.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111H1P6**  
 Amount of Each Receipt this Period 300.00  
 Memo Item

**C. Gutheil, Thomas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6 Wellman St  
 City Brookline State MA Zip Code 02446-2831  
 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 ▼ 384.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111JB44**  
 Amount of Each Receipt this Period 3.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	308.00
<b>TOTAL</b> 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 295
	<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. Gutheil, Thomas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6 Wellman St  
 City Brookline State MA Zip Code 02446-2831  
 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 ▼ 384.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1120QT3**  
 Amount of Each Receipt this Period 3.00  
 Memo Item

**B. Gutheil, Thomas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6 Wellman St  
 City Brookline State MA Zip Code 02446-2831  
 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 ▼ 384.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C11227N4**  
 Amount of Each Receipt this Period 3.00  
 Memo Item

**C. Hacking, Colin, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 850 Webster St Apt 832  
 City Palo Alto State CA Zip Code 94301-2864  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WKW06**  
 Amount of Each Receipt this Period 17.50  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 23.50  
**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 113 OF 295
	<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. Hacking, Colin, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 850 Webster St  
 Apt 832  
 City Palo Alto State CA Zip Code 94301-2864  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y3RR4**  
 Amount of Each Receipt this Period  
 35.00  
 Memo Item

**B. Hacking, Colin, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 850 Webster St  
 Apt 832  
 City Palo Alto State CA Zip Code 94301-2864  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y54B5**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**C. Henry, Bayard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10 Longwood Dr  
 Unit 217  
 City Westwood State MA Zip Code 02090-1139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WKZ28**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	110.00
<b>TOTAL</b> 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 114 OF 295
	<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. Henry, Bayard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10 Longwood Dr  
 Unit 217  
 City Westwood State MA Zip Code 02090-1139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WM233**  
 Amount of Each Receipt this Period  
 35.00  
 Memo Item

**B. Henry, Bayard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10 Longwood Dr  
 Unit 217  
 City Westwood State MA Zip Code 02090-1139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WM688**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**C. Henry, Bayard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10 Longwood Dr  
 Unit 217  
 City Westwood State MA Zip Code 02090-1139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y4H49**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	135.00
<b>TOTAL</b> 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 115 OF 295
	<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. Henry, Bayard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10 Longwood Dr  
 Unit 217  
 City Westwood State MA Zip Code 02090-1139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111GKC8**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**B. Henry, Bayard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10 Longwood Dr  
 Unit 217  
 City Westwood State MA Zip Code 02090-1139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111H1Z7**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**C. Henry, Bayard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10 Longwood Dr  
 Unit 217  
 City Westwood State MA Zip Code 02090-1139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111H205**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	150.00
<b>TOTAL</b> 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 116 OF 295
	<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. Henry, Bayard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10 Longwood Dr  
 Unit 217  
 City Westwood State MA Zip Code 02090-1139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111HCW7**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**B. Henry, Bayard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10 Longwood Dr  
 Unit 217  
 City Westwood State MA Zip Code 02090-1139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1121684**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**C. Henry, Bayard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10 Longwood Dr  
 Unit 217  
 City Westwood State MA Zip Code 02090-1139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1121BW2**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

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

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

55.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 117 OF 295
	<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. Henry, Bayard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10 Longwood Dr  
 Unit 217  
 City Westwood State MA Zip Code 02090-1139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1121KV9**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**B. Hill, Lucius, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7 Riverwoods Dr  
 City Exeter State NH Zip Code 03833-4373  
 FEC ID number of contributing federal political 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 / 15 / 2021  
**Transaction ID : VR08C10Y4C16**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**C. Hill, Lucius, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7 Riverwoods Dr  
 City Exeter State NH Zip Code 03833-4373  
 FEC ID number of contributing federal political 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 / 22 / 2021  
**Transaction ID : VR08C111H357**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	250.00
<b>TOTAL</b> 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 118 OF 295
	<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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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. Hill, Lucius, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7 Riverwoods Dr  
 City Exeter State NH Zip Code 03833-4373  
 FEC ID number of contributing federal political 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 / 22 / 2021  
**Transaction ID : VR08C111H8V1**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**B. Hill, Lucius, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7 Riverwoods Dr  
 City Exeter State NH Zip Code 03833-4373  
 FEC ID number of contributing federal political 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 / 28 / 2021  
**Transaction ID : VR08C111ZB79**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**C. Hoffman, Donald, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1808 N Larrabee St  
 City Chicago State IL Zip Code 60614-5208  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 222.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WJVD7**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	115.00
<b>TOTAL</b> 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 119 OF 295
	<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. Hoffman, Donald, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1808 N Larrabee St  
 City Chicago State IL Zip Code 60614-5208  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 222.50

Date of Receipt 02 / 08 / 2021  
**Transaction ID : VR08C10WKAZ1**  
 Amount of Each Receipt this Period 35.00  
 Memo Item

**B. Hoffman, Donald, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1808 N Larrabee St  
 City Chicago State IL Zip Code 60614-5208  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 222.50

Date of Receipt 02 / 15 / 2021  
**Transaction ID : VR08C10Y4GF5**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**C. Holliday, William, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1125 Isaac Creek Cir  
 City New Braunfels State TX Zip Code 78132-3252  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 08 / 2021  
**Transaction ID : VR08C10WKQC3**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	100.00
<b>TOTAL</b> 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 295
	<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. Holliday, William, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1125 Isaac Creek Cir  
 City New Braunfels State TX Zip Code 78132-3252  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y2G26**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**B. Holliday, William, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1125 Isaac Creek Cir  
 City New Braunfels State TX Zip Code 78132-3252  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y2G33**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**C. Holliday, William, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1125 Isaac Creek Cir  
 City New Braunfels State TX Zip Code 78132-3252  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y47P0**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	150.00
<b>TOTAL</b> 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 121 OF 295
	<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. Holliday, William, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1125 Isaac Creek Cir  
 City New Braunfels State TX Zip Code 78132-3252  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 28 / 2021  
**Transaction ID : VR08C1120MB0**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Horie, Nancy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 640 Ocean Ave Apt 321  
 City Portland State ME Zip Code 04103-2836  
 FEC ID number of contributing federal political 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 / 08 / 2021  
**Transaction ID : VR08C10WMQ29**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**C. Horie, Nancy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 640 Ocean Ave Apt 321  
 City Portland State ME Zip Code 04103-2836  
 FEC ID number of contributing federal political 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 / 08 / 2021  
**Transaction ID : VR08C10WMQ36**  
 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: (check only one)	PAGE 122 OF 295
	<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. Horie, Nancy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 640 Ocean Ave  
Apt 321

City Portland State ME Zip Code 04103-2836

FEC ID number of contributing federal political 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  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021

**Transaction ID : VR08C10Y3403**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. Horie, Nancy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 640 Ocean Ave  
Apt 321

City Portland State ME Zip Code 04103-2836

FEC ID number of contributing federal political 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  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021

**Transaction ID : VR08C10Y4560**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. Horie, Nancy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 640 Ocean Ave  
Apt 321

City Portland State ME Zip Code 04103-2836

FEC ID number of contributing federal political 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  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021

**Transaction ID : VR08C10Y4MG1**

Amount of Each Receipt this Period  
15.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	165.00
<b>TOTAL</b> 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 295
	<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. Horie, Nancy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 640 Ocean Ave  
 Apt 321  
 City Portland State ME Zip Code 04103-2836  
 FEC ID number of contributing federal political 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 / 28 / 2021  
**Transaction ID : VR08C1121643**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**B. Howe, Linda, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Selwyn Rd  
 City Belmont State MA Zip Code 02478-3556  
 FEC ID number of contributing federal political 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 02 / 08 / 2021  
**Transaction ID : VR08C10WJYV4**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**C. Howe, Linda, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Selwyn Rd  
 City Belmont State MA Zip Code 02478-3556  
 FEC ID number of contributing federal political 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 02 / 08 / 2021  
**Transaction ID : VR08C10WKMV1**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	45.00
<b>TOTAL</b> 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 124 OF 295
	<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. Howe, Linda, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Selwyn Rd  
 City Belmont State MA Zip Code 02478-3556  
 FEC ID number of contributing federal political 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 / 08 / 2021  
**Transaction ID : VR08C10WKN34**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**B. Howe, Linda, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Selwyn Rd  
 City Belmont State MA Zip Code 02478-3556  
 FEC ID number of contributing federal political 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 / 08 / 2021  
**Transaction ID : VR08C10WMCP2**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**C. Howe, Linda, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Selwyn Rd  
 City Belmont State MA Zip Code 02478-3556  
 FEC ID number of contributing federal political 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 / 08 / 2021  
**Transaction ID : VR08C10WMMN2**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	55.00
<b>TOTAL</b> 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 125 OF 295
	<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. Howe, Linda, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Selwyn Rd

City Belmont	State MA	Zip Code 02478-3556
-----------------	-------------	------------------------

FEC ID number of contributing federal political 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 / 08 / 2021  
**Transaction ID : VR08C10WMMPO**

Amount of Each Receipt this Period  
 15.00

Memo Item

**B. Howe, Linda, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Selwyn Rd

City Belmont	State MA	Zip Code 02478-3556
-----------------	-------------	------------------------

FEC ID number of contributing federal political 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 / 08 / 2021  
**Transaction ID : VR08C10WNPQ0**

Amount of Each Receipt this Period  
 3.00

Memo Item

**C. Howe, Linda, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Selwyn Rd

City Belmont	State MA	Zip Code 02478-3556
-----------------	-------------	------------------------

FEC ID number of contributing federal political 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 / 15 / 2021  
**Transaction ID : VR08C10Y2HJ5**

Amount of Each Receipt this Period  
 15.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	33.00
<b>TOTAL</b> 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 126 OF 295
	<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. Howe, Linda, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Selwyn Rd  
 City Belmont State MA Zip Code 02478-3556  
 FEC ID number of contributing federal political 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 / 15 / 2021  
**Transaction ID : VR08C10Y2PF1**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**B. Howe, Linda, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Selwyn Rd  
 City Belmont State MA Zip Code 02478-3556  
 FEC ID number of contributing federal political 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 / 15 / 2021  
**Transaction ID : VR08C10Y3HN5**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**C. Howe, Linda, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Selwyn Rd  
 City Belmont State MA Zip Code 02478-3556  
 FEC ID number of contributing federal political 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 / 15 / 2021  
**Transaction ID : VR08C10Y4XJ5**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	35.00
<b>TOTAL</b> 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 127 OF 295
	(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. Howe, Linda, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Selwyn Rd  
 City Belmont State MA Zip Code 02478-3556  
 FEC ID number of contributing federal political 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 02 / 15 / 2021  
**Transaction ID : VR08C10Y5E34**  
 Amount of Each Receipt this Period 3.00  
 Memo Item

**B. Ives, J. Atwood, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1010 Waltham St Apt 598  
 City Lexington State MA Zip Code 02421-8093  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1280.00

Date of Receipt 02 / 08 / 2021  
**Transaction ID : VR08C10WK6F7**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. Ives, J. Atwood, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1010 Waltham St Apt 598  
 City Lexington State MA Zip Code 02421-8093  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1280.00

Date of Receipt 02 / 08 / 2021  
**Transaction ID : VR08C10WKAR5**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	153.00
<b>TOTAL</b> 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 295
	<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  
**Ives, J. Atwood, , ,**

Mailing Address 1010 Waltham St  
Apt 598

City Lexington State MA Zip Code 02421-8093

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1280.00

Date of Receipt  
MM / DD / YYYY  
02 / 08 / 2021

**Transaction ID : VR08C10WN5G7**

Amount of Each Receipt this Period  
5.00

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**Ives, J. Atwood, , ,**

Mailing Address 1010 Waltham St  
Apt 598

City Lexington State MA Zip Code 02421-8093

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1280.00

Date of Receipt  
MM / DD / YYYY  
02 / 15 / 2021

**Transaction ID : VR08C10Y2KM4**

Amount of Each Receipt this Period  
35.00

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**Ives, J. Atwood, , ,**

Mailing Address 1010 Waltham St  
Apt 598

City Lexington State MA Zip Code 02421-8093

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1280.00

Date of Receipt  
MM / DD / YYYY  
02 / 15 / 2021

**Transaction ID : VR08C10Y2VZ7**

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: (check only one)	PAGE 129 OF 295
	<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. Ives, J. Atwood, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1010 Waltham St  
 Apt 598  
 City Lexington State MA Zip Code 02421-8093  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y40R2**  
 Amount of Each Receipt this Period  
 35.00  
 Memo Item

**B. Ives, J. Atwood, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1010 Waltham St  
 Apt 598  
 City Lexington State MA Zip Code 02421-8093  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y4MM2**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**C. Ives, J. Atwood, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1010 Waltham St  
 Apt 598  
 City Lexington State MA Zip Code 02421-8093  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y4MN0**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	65.00
<b>TOTAL</b> 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 130 OF 295
	<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.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**Ives, J. Atwood, , ,**

Mailing Address 1010 Waltham St  
Apt 598

City Lexington State MA Zip Code 02421-8093

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1280.00

Date of Receipt  
MM / DD / YYYY  
02 / 15 / 2021

**Transaction ID : VR08C10Y4MP8**

Amount of Each Receipt this Period  
15.00

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**Ives, J. Atwood, , ,**

Mailing Address 1010 Waltham St  
Apt 598

City Lexington State MA Zip Code 02421-8093

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1280.00

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2021

**Transaction ID : VR08C111EJF0**

Amount of Each Receipt this Period  
35.00

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**Ives, J. Atwood, , ,**

Mailing Address 1010 Waltham St  
Apt 598

City Lexington State MA Zip Code 02421-8093

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1280.00

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2021

**Transaction ID : VR08C111FMK7**

Amount of Each Receipt this Period  
15.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	65.00
<b>TOTAL</b> 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 131 OF 295
	<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. Ives, J. Atwood, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1010 Waltham St  
 Apt 598  
 City Lexington State MA Zip Code 02421-8093  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1280.00

Date of Receipt  
 02 / 22 / 2021  
**Transaction ID : VR08C111H128**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**B. Ives, J. Atwood, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1010 Waltham St  
 Apt 598  
 City Lexington State MA Zip Code 02421-8093  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1280.00

Date of Receipt  
 02 / 22 / 2021  
**Transaction ID : VR08C111HAV4**  
 Amount of Each Receipt this Period  
 35.00  
 Memo Item

**C. Ives, J. Atwood, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1010 Waltham St  
 Apt 598  
 City Lexington State MA Zip Code 02421-8093  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1280.00

Date of Receipt  
 02 / 28 / 2021  
**Transaction ID : VR08C1120ZQ7**  
 Amount of Each Receipt this Period  
 35.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	85.00
<b>TOTAL</b> 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 132 OF 295
	<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. James, Roger, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15011 Cherry St  
 City Guerneville State CA Zip Code 95446-9671  
 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 ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WM6S3**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**B. James, Roger, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15011 Cherry St  
 City Guerneville State CA Zip Code 95446-9671  
 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 ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WNCQ8**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**C. James, Roger, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15011 Cherry St  
 City Guerneville State CA Zip Code 95446-9671  
 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 ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y3KR4**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	55.00
<b>TOTAL</b> 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 133 OF 295
	<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. James, Roger, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15011 Cherry St

City Guerneville	State CA	Zip Code 95446-9671
---------------------	-------------	------------------------

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 ▼  
210.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	22	/	2021

**Transaction ID : VR08C111GG98**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. Jurvetson, Karla, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 350 2Nd St  
Ste 4

City Los Altos	State CA	Zip Code 94022-3602
-------------------	-------------	------------------------

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 ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	15	/	2021

**Transaction ID : VR08C10Y2752**

Amount of Each Receipt this Period  
5000.00

Memo Item

**C. Keller, Debra, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6534 E Brittain St

City Long Beach	State CA	Zip Code 90808-2455
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
943.50

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	08	/	2021

**Transaction ID : VR08C10WJCS0**

Amount of Each Receipt this Period  
15.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5065.00
<b>TOTAL</b> 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 134 OF 295
	<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. Keller, Debra, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6534 E Brittain St  
 City Long Beach State CA Zip Code 90808-2455  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 943.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WJCT8**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**B. Keller, Debra, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6534 E Brittain St  
 City Long Beach State CA Zip Code 90808-2455  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 943.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WJCV6**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**C. Keller, Debra, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6534 E Brittain St  
 City Long Beach State CA Zip Code 90808-2455  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 943.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WJEV0**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	40.00
<b>TOTAL</b> 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 135 OF 295
	<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. Keller, Debra, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6534 E Brittain St  
 City Long Beach State CA Zip Code 90808-2455  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 943.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WJN69**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**B. Keller, Debra, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6534 E Brittain St  
 City Long Beach State CA Zip Code 90808-2455  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 943.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WJN77**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**C. Keller, Debra, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6534 E Brittain St  
 City Long Beach State CA Zip Code 90808-2455  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 943.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WK810**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	45.00
<b>TOTAL</b> 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 136 OF 295
	<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. Keller, Debra, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6534 E Brittain St  
 City Long Beach State CA Zip Code 90808-2455  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 943.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WKR31**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**B. Keller, Debra, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6534 E Brittain St  
 City Long Beach State CA Zip Code 90808-2455  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 943.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WKVC8**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**C. Keller, Debra, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6534 E Brittain St  
 City Long Beach State CA Zip Code 90808-2455  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 943.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WKW30**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	35.00
<b>TOTAL</b> 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 137 OF 295
	<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. Keller, Debra, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6534 E Brittain St  
 City Long Beach State CA Zip Code 90808-2455  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 943.50

Date of Receipt 02 / 08 / 2021  
**Transaction ID : VR08C10WNW77**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**B. Keller, Debra, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6534 E Brittain St  
 City Long Beach State CA Zip Code 90808-2455  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 943.50

Date of Receipt 02 / 15 / 2021  
**Transaction ID : VR08C10Y25P1**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**C. Keller, Debra, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6534 E Brittain St  
 City Long Beach State CA Zip Code 90808-2455  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 943.50

Date of Receipt 02 / 15 / 2021  
**Transaction ID : VR08C10Y25Q9**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	35.00
<b>TOTAL</b> 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 295
	<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. Keller, Debra, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6534 E Brittain St  
 City Long Beach State CA Zip Code 90808-2455  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 943.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y27B9**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

**B. Keller, Debra, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6534 E Brittain St  
 City Long Beach State CA Zip Code 90808-2455  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 943.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y27C7**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

**C. Keller, Debra, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6534 E Brittain St  
 City Long Beach State CA Zip Code 90808-2455  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 943.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y2821**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	25.00
<b>TOTAL</b> 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 139 OF 295
	<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. Keller, Debra, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6534 E Brittain St  
 City Long Beach State CA Zip Code 90808-2455  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 943.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y29S4**  
 Amount of Each Receipt this Period  
 3.00  
 Memo Item

**B. Keller, Debra, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6534 E Brittain St  
 City Long Beach State CA Zip Code 90808-2455  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 943.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y29T2**  
 Amount of Each Receipt this Period  
 3.00  
 Memo Item

**C. Keller, Debra, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6534 E Brittain St  
 City Long Beach State CA Zip Code 90808-2455  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 943.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y29V9**  
 Amount of Each Receipt this Period  
 3.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	9.00
<b>TOTAL</b> 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 295
	<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. Keller, Debra, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6534 E Brittain St  
 City Long Beach State CA Zip Code 90808-2455  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 943.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y2AJ1**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**B. Keller, Debra, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6534 E Brittain St  
 City Long Beach State CA Zip Code 90808-2455  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 943.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y3RC0**  
 Amount of Each Receipt this Period  
 2.00  
 Memo Item

**C. Keller, Debra, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6534 E Brittain St  
 City Long Beach State CA Zip Code 90808-2455  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 943.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y4TC2**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	27.00
<b>TOTAL</b> 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 141 OF 295
	<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. Keller, Debra, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6534 E Brittain St  
 City Long Beach State CA Zip Code 90808-2455  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 943.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y4TD0**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Keller, Debra, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6534 E Brittain St  
 City Long Beach State CA Zip Code 90808-2455  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 943.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y4WH7**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**C. Keller, Debra, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6534 E Brittain St  
 City Long Beach State CA Zip Code 90808-2455  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 943.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y4WJ5**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	20.00
<b>TOTAL</b> 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 142 OF 295
	(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. King, James, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 118 Baldwin Farm Rd  
 City Pittsboro State NC Zip Code 27312-4909  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Aldern Academy Occupation (for Individual) Teacher  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 314.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111FAV0**  
 Amount of Each Receipt this Period 3.00  
 Memo Item

**B. King, James, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 118 Baldwin Farm Rd  
 City Pittsboro State NC Zip Code 27312-4909  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Aldern Academy Occupation (for Individual) Teacher  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 314.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111FVX0**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**C. King, James, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 118 Baldwin Farm Rd  
 City Pittsboro State NC Zip Code 27312-4909  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Aldern Academy Occupation (for Individual) Teacher  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 314.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111GKA2**  
 Amount of Each Receipt this Period 300.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	308.00
<b>TOTAL</b> 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 143 OF 295
	(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. King, James, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 118 Baldwin Farm Rd

City Pittsboro	State NC	Zip Code 27312-4909
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Auldern Academy	Occupation (for Individual) Teacher
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
314.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2021

**Transaction ID : VR08C111ZBJ8**

Amount of Each Receipt this Period  
3.00

Memo Item

**B. King, James, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 118 Baldwin Farm Rd

City Pittsboro	State NC	Zip Code 27312-4909
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Auldern Academy	Occupation (for Individual) Teacher
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
314.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2021

**Transaction ID : VR08C112ZKW5**

Amount of Each Receipt this Period  
3.00

Memo Item

**C. Kleinberg-Levin, David, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 171 W 79Th St

City New York	State NY	Zip Code 10024-6449
------------------	-------------	------------------------

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 ▼  
270.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	08	/	2021

**Transaction ID : VR08C10WKY59**

Amount of Each Receipt this Period  
5.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	11.00
<b>TOTAL</b> 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 144 OF 295
	<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. Kleinberg-Levin, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 171 W 79Th St  
 City New York State NY Zip Code 10024-6449  
 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 ▼ 270.00

Date of Receipt 02 / 08 / 2021  
**Transaction ID : VR08C10WM6H9**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Kleinberg-Levin, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 171 W 79Th St  
 City New York State NY Zip Code 10024-6449  
 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 ▼ 270.00

Date of Receipt 02 / 08 / 2021  
**Transaction ID : VR08C10WN2J7**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**C. Kleinberg-Levin, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 171 W 79Th St  
 City New York State NY Zip Code 10024-6449  
 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 ▼ 270.00

Date of Receipt 02 / 15 / 2021  
**Transaction ID : VR08C10Y3VD4**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	105.00
<b>TOTAL</b> 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 145 OF 295
	<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. Kleinberg-Levin, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 171 W 79Th St  
 City New York State NY Zip Code 10024-6449  
 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 ▼ 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y4H73**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**B. Kleinberg-Levin, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 171 W 79Th St  
 City New York State NY Zip Code 10024-6449  
 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 ▼ 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111GH31**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**C. Kliman, Ann, S, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 113 Richdale Ave Unit 35  
 City Cambridge State MA Zip Code 02140-3371  
 FEC ID number of contributing federal political 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 / 28 / 2021  
**Transaction ID : VR08C1121DK3**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	365.00
<b>TOTAL</b> 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 295
	<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. Kosminsky, Jane, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 41 W 72Nd St  
 Apt 16B  
 City New York State NY Zip Code 10023-3477  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) The Juilliard School Occupation (for Individual) Teacher  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 372.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WM5E5**  
 Amount of Each Receipt this Period  
 3.00  
 Memo Item

**B. Kosminsky, Jane, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 41 W 72Nd St  
 Apt 16B  
 City New York State NY Zip Code 10023-3477  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) The Juilliard School Occupation (for Individual) Teacher  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 372.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WNF11**  
 Amount of Each Receipt this Period  
 3.00  
 Memo Item

**C. Kosminsky, Jane, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 41 W 72Nd St  
 Apt 16B  
 City New York State NY Zip Code 10023-3477  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) The Juilliard School Occupation (for Individual) Teacher  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 372.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WNF29**  
 Amount of Each Receipt this Period  
 3.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	9.00
<b>TOTAL</b> 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 295
	<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. Kosminsky, Jane, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 41 W 72Nd St  
 Apt 16B  
 City New York State NY Zip Code 10023-3477  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) The Juilliard School Occupation (for Individual) Teacher  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 372.00

Date of Receipt 02 / 15 / 2021  
**Transaction ID : VR08C10Y39F1**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**B. Kosminsky, Jane, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 41 W 72Nd St  
 Apt 16B  
 City New York State NY Zip Code 10023-3477  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) The Juilliard School Occupation (for Individual) Teacher  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 372.00

Date of Receipt 02 / 15 / 2021  
**Transaction ID : VR08C10Y3M49**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**C. Kosminsky, Jane, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 41 W 72Nd St  
 Apt 16B  
 City New York State NY Zip Code 10023-3477  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) The Juilliard School Occupation (for Individual) Teacher  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 372.00

Date of Receipt 02 / 15 / 2021  
**Transaction ID : VR08C10Y4QK1**  
 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 148 OF 295
	<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. Kosminsky, Jane, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 41 W 72Nd St  
 Apt 16B  
 City New York State NY Zip Code 10023-3477  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) The Juilliard School Occupation (for Individual) Teacher  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 372.00

Date of Receipt 02 / 15 / 2021  
**Transaction ID : VR08C10Y4QM9**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**B. Kosminsky, Jane, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 41 W 72Nd St  
 Apt 16B  
 City New York State NY Zip Code 10023-3477  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) The Juilliard School Occupation (for Individual) Teacher  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 372.00

Date of Receipt 02 / 15 / 2021  
**Transaction ID : VR08C10Y4QN6**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**C. Kosminsky, Jane, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 41 W 72Nd St  
 Apt 16B  
 City New York State NY Zip Code 10023-3477  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) The Juilliard School Occupation (for Individual) Teacher  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 372.00

Date of Receipt 02 / 22 / 2021  
**Transaction ID : VR08C111G8Y6**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	15.00
<b>TOTAL</b> 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 149 OF 295
	<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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Kosminsky, Jane, , ,**

Mailing Address 41 W 72Nd St  
Apt 16B

City New York State NY Zip Code 10023-3477

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

Name of Employer (for Individual) The Juilliard School Occupation (for Individual) Teacher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **372.00**

Date of Receipt **02 / 28 / 2021**

**Transaction ID : VR08C1120M87**

Amount of Each Receipt this Period **5.00**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Lechtanski, Julie, , ,**

Mailing Address 2500 Wyandotte Dr

City Fort Collins State CO Zip Code 80526-1462

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt **02 / 15 / 2021**

**Transaction ID : VR08C10Y3TF9**

Amount of Each Receipt this Period **15.00**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Lechtanski, Julie, , ,**

Mailing Address 2500 Wyandotte Dr

City Fort Collins State CO Zip Code 80526-1462

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

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

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt **02 / 22 / 2021**

**Transaction ID : VR08C111GR45**

Amount of Each Receipt this Period **50.00**

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... **70.00**

**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 295
	(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. Leveque, Dorothy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1415 Upland Hills Dr N  
 City Upland State CA Zip Code 91784-9157  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1120ZJ8**  
 Amount of Each Receipt this Period  
 35.00  
 Memo Item

**B. Leveque, Dorothy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1415 Upland Hills Dr N  
 City Upland State CA Zip Code 91784-9157  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1121E55**  
 Amount of Each Receipt this Period  
 35.00  
 Memo Item

**C. Leveque, Dorothy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1415 Upland Hills Dr N  
 City Upland State CA Zip Code 91784-9157  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1121E63**  
 Amount of Each Receipt this Period  
 35.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	105.00
<b>TOTAL</b> 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 151 OF 295
	<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 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A. Leveque, Dorothy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1415 Upland Hills Dr N  
 City Upland State CA Zip Code 91784-9157  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1121H69**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**B. Lewis, Georgie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 30 Bokum Rd  
 City Essex State CT Zip Code 06426-1510  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WNFG9**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**C. Lewis, Georgie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 30 Bokum Rd  
 City Essex State CT Zip Code 06426-1510  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y5NF4**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	80.00
<b>TOTAL</b> 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 152 OF 295
	<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. Lewis, Georgie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 30 Bokum Rd  
 City Essex State CT Zip Code 06426-1510  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1122ZH3**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**B. Mallory, Carl, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 410 Stokes Ln  
 City Taft State CA Zip Code 93268-3325  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1011.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WJM82**  
 Amount of Each Receipt this Period  
 3.00  
 Memo Item

**C. Mallory, Carl, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 410 Stokes Ln  
 City Taft State CA Zip Code 93268-3325  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1011.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WJTR2**  
 Amount of Each Receipt this Period  
 1.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	54.00
<b>TOTAL</b> 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 295
	(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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Mallory, Carl, , ,**

Mailing Address 410 Stokes Ln

City Taft	State CA	Zip Code 93268-3325
--------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1011.50

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2021

**Transaction ID : VR08C10WJWA7**

Amount of Each Receipt this Period  
5.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Mallory, Carl, , ,**

Mailing Address 410 Stokes Ln

City Taft	State CA	Zip Code 93268-3325
--------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1011.50

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2021

**Transaction ID : VR08C10WJY35**

Amount of Each Receipt this Period  
10.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Mallory, Carl, , ,**

Mailing Address 410 Stokes Ln

City Taft	State CA	Zip Code 93268-3325
--------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1011.50

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2021

**Transaction ID : VR08C10WKFJO**

Amount of Each Receipt this Period  
5.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	20.00
<b>TOTAL</b> 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 154 OF 295
	<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. Mallory, Carl, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 410 Stokes Ln  
 City Taft State CA Zip Code 93268-3325  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1011.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WKXY4**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**B. Mallory, Carl, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 410 Stokes Ln  
 City Taft State CA Zip Code 93268-3325  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1011.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WKZ60**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**C. Mallory, Carl, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 410 Stokes Ln  
 City Taft State CA Zip Code 93268-3325  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1011.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WM4P5**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	525.00
<b>TOTAL</b> 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 155 OF 295
	<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. Mallory, Carl, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 410 Stokes Ln  
 City Taft State CA Zip Code 93268-3325  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1011.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WN7R6**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**B. Mallory, Carl, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 410 Stokes Ln  
 City Taft State CA Zip Code 93268-3325  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1011.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WNB63**  
 Amount of Each Receipt this Period  
 3.00  
 Memo Item

**C. Mallory, Carl, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 410 Stokes Ln  
 City Taft State CA Zip Code 93268-3325  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1011.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WNB71**  
 Amount of Each Receipt this Period  
 3.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	11.00
<b>TOTAL</b> 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 156 OF 295
	<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. Mallory, Carl, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 410 Stokes Ln  
 City Taft State CA Zip Code 93268-3325  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1011.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WNXG1**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**B. Mallory, Carl, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 410 Stokes Ln  
 City Taft State CA Zip Code 93268-3325  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1011.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y28X2**  
 Amount of Each Receipt this Period  
 3.00  
 Memo Item

**C. Mallory, Carl, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 410 Stokes Ln  
 City Taft State CA Zip Code 93268-3325  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1011.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y28Y0**  
 Amount of Each Receipt this Period  
 3.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	11.00
<b>TOTAL</b> 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 157 OF 295
	(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. Mallory, Carl, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 410 Stokes Ln  
 City Taft State CA Zip Code 93268-3325  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1011.50

Date of Receipt  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y28Z8**  
 Amount of Each Receipt this Period 3.00  
 Memo Item

**B. Mallory, Carl, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 410 Stokes Ln  
 City Taft State CA Zip Code 93268-3325  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1011.50

Date of Receipt  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y2906**  
 Amount of Each Receipt this Period 3.00  
 Memo Item

**C. Mallory, Carl, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 410 Stokes Ln  
 City Taft State CA Zip Code 93268-3325  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1011.50

Date of Receipt  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y2914**  
 Amount of Each Receipt this Period 3.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	9.00
<b>TOTAL</b> 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 158 OF 295
	(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. Mallory, Carl, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 410 Stokes Ln

City Taft	State CA	Zip Code 93268-3325
--------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1011.50

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02		15		2021

**Transaction ID : VR08C10Y2AX8**

Amount of Each Receipt this Period  

3.00
------

 Memo Item

**B. Mallory, Carl, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 410 Stokes Ln

City Taft	State CA	Zip Code 93268-3325
--------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1011.50

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02		15		2021

**Transaction ID : VR08C10Y2FN3**

Amount of Each Receipt this Period  

5.00
------

 Memo Item

**C. Mallory, Carl, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 410 Stokes Ln

City Taft	State CA	Zip Code 93268-3325
--------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1011.50

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02		15		2021

**Transaction ID : VR08C10Y4G49**

Amount of Each Receipt this Period  

15.00
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 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	23.00
<b>TOTAL</b> 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 159 OF 295
	(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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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 410 Stokes Ln

City Taft	State CA	Zip Code 93268-3325
--------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1011.50

Date of Receipt  
MM / DD / YYYY  
02 / 15 / 2021

**Transaction ID : VR08C10Y4G56**

Amount of Each Receipt this Period  
15.00

Memo Item

**B. Mallory, Carl, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 410 Stokes Ln

City Taft	State CA	Zip Code 93268-3325
--------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1011.50

Date of Receipt  
MM / DD / YYYY  
02 / 15 / 2021

**Transaction ID : VR08C10Y4NP1**

Amount of Each Receipt this Period  
5.00

Memo Item

**C. Mallory, Carl, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 410 Stokes Ln

City Taft	State CA	Zip Code 93268-3325
--------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1011.50

Date of Receipt  
MM / DD / YYYY  
02 / 15 / 2021

**Transaction ID : VR08C10Y4NQ9**

Amount of Each Receipt this Period  
5.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	25.00
<b>TOTAL</b> 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 160 OF 295
	<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. Mallory, Carl, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 410 Stokes Ln

City Taft	State CA	Zip Code 93268-3325
--------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1011.50

Date of Receipt  

M M	/	D D	/	Y Y Y Y
02		15		2021

**Transaction ID : VR08C10Y4NR7**

Amount of Each Receipt this Period  

3.00
------

 Memo Item

**B. Mallory, Carl, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 410 Stokes Ln

City Taft	State CA	Zip Code 93268-3325
--------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1011.50

Date of Receipt  

M M	/	D D	/	Y Y Y Y
02		15		2021

**Transaction ID : VR08C10Y5BD6**

Amount of Each Receipt this Period  

3.00
------

 Memo Item

**C. Mallory, Carl, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 410 Stokes Ln

City Taft	State CA	Zip Code 93268-3325
--------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1011.50

Date of Receipt  

M M	/	D D	/	Y Y Y Y
02		15		2021

**Transaction ID : VR08C10Y5BE4**

Amount of Each Receipt this Period  

3.00
------

 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	11.00
<b>TOTAL</b> 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 161 OF 295
	<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. Mallory, Carl, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 410 Stokes Ln  
 City Taft State CA Zip Code 93268-3325  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1011.50

Date of Receipt  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y5MQ4**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

**B. Mallory, Carl, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 410 Stokes Ln  
 City Taft State CA Zip Code 93268-3325  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1011.50

Date of Receipt  
 02 / 22 / 2021  
**Transaction ID : VR08C111F5F3**  
 Amount of Each Receipt this Period  
 3.00  
 Memo Item

**C. Mallory, Carl, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 410 Stokes Ln  
 City Taft State CA Zip Code 93268-3325  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1011.50

Date of Receipt  
 02 / 22 / 2021  
**Transaction ID : VR08C111F607**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	308.00
<b>TOTAL</b> 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 162 OF 295
	<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)  
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**A. Mallory, Carl, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 410 Stokes Ln

City Taft	State CA	Zip Code 93268-3325
--------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1011.50

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2021

**Transaction ID : VR08C111FM81**

Amount of Each Receipt this Period  
2.50

Memo Item

**B. Mallory, Carl, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 410 Stokes Ln

City Taft	State CA	Zip Code 93268-3325
--------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1011.50

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2021

**Transaction ID : VR08C111G0Y0**

Amount of Each Receipt this Period  
1.00

Memo Item

**C. Mallory, Carl, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 410 Stokes Ln

City Taft	State CA	Zip Code 93268-3325
--------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1011.50

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2021

**Transaction ID : VR08C111G5V6**

Amount of Each Receipt this Period  
5.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	8.50
<b>TOTAL</b> 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 163 OF 295
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
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**A. Mallory, Carl, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 410 Stokes Ln

City Taft	State CA	Zip Code 93268-3325
--------------	-------------	------------------------

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1011.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021

**Transaction ID : VR08C111J261**

Amount of Each Receipt this Period  
3.00

Memo Item

**B. Mallory, Carl, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 410 Stokes Ln

City Taft	State CA	Zip Code 93268-3325
--------------	-------------	------------------------

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1011.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021

**Transaction ID : VR08C111J279**

Amount of Each Receipt this Period  
3.00

Memo Item

**C. Mallory, Carl, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 410 Stokes Ln

City Taft	State CA	Zip Code 93268-3325
--------------	-------------	------------------------

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

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

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
1011.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021

**Transaction ID : VR08C111Z9A9**

Amount of Each Receipt this Period  
3.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	9.00
<b>TOTAL</b> 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 164 OF 295
	(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. Mallory, Carl, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 410 Stokes Ln

City Taft	State CA	Zip Code 93268-3325
--------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1011.50

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2021

**Transaction ID : VR08C111ZNK6**

Amount of Each Receipt this Period  

4.00
------

 Memo Item

**B. Mallory, Carl, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 410 Stokes Ln

City Taft	State CA	Zip Code 93268-3325
--------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1011.50

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2021

**Transaction ID : VR08C111ZVZ3**

Amount of Each Receipt this Period  

5.00
------

 Memo Item

**C. Mallory, Carl, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 410 Stokes Ln

City Taft	State CA	Zip Code 93268-3325
--------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1011.50

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2021

**Transaction ID : VR08C111ZW01**

Amount of Each Receipt this Period  

5.00
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 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	14.00
<b>TOTAL</b> 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 165 OF 295
	<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. Mallory, Carl, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 410 Stokes Ln  
 City Taft State CA Zip Code 93268-3325  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1011.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1120E19**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**B. Manuel, Nathan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3023 Oak Ridge Pl  
 City Grand Prairie State TX Zip Code 75052-5728  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 499.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WJEA5**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**C. Manuel, Nathan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3023 Oak Ridge Pl  
 City Grand Prairie State TX Zip Code 75052-5728  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 499.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WKWK4**  
 Amount of Each Receipt this Period  
 7.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	62.00
<b>TOTAL</b> 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 166 OF 295
	<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. Manuel, Nathan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3023 Oak Ridge Pl  
 City Grand Prairie State TX Zip Code 75052-5728  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 499.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WMP T5**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**B. Manuel, Nathan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3023 Oak Ridge Pl  
 City Grand Prairie State TX Zip Code 75052-5728  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 499.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WND H4**  
 Amount of Each Receipt this Period  
 35.00  
 Memo Item

**C. Manuel, Nathan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3023 Oak Ridge Pl  
 City Grand Prairie State TX Zip Code 75052-5728  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 499.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WND Y6**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	65.00
<b>TOTAL</b> 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 167 OF 295
	<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. Manuel, Nathan, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 3023 Oak Ridge Pl  
City Grand Prairie State TX Zip Code 75052-5728  
FEC ID number of contributing federal political committee. **C**  
Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 499.00

Date of Receipt  
MM / DD / YYYY  
02 / 08 / 2021  
**Transaction ID : VR08C10WNJ33**  
Amount of Each Receipt this Period  
100.00  
 Memo Item

**B. Manuel, Nathan, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 3023 Oak Ridge Pl  
City Grand Prairie State TX Zip Code 75052-5728  
FEC ID number of contributing federal political committee. **C**  
Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 499.00

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2021  
**Transaction ID : VR08C111EY92**  
Amount of Each Receipt this Period  
15.00  
 Memo Item

**C. Manuel, Nathan, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 3023 Oak Ridge Pl  
City Grand Prairie State TX Zip Code 75052-5728  
FEC ID number of contributing federal political committee. **C**  
Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
Receipt For:  Primary  General  Other (specify)  
Aggregate Year-to-Date ▼ 499.00

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2021  
**Transaction ID : VR08C111F232**  
Amount of Each Receipt this Period  
15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	130.00
<b>TOTAL</b> 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 168 OF 295
	<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. Manuel, Nathan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3023 Oak Ridge Pl  
 City Grand Prairie State TX Zip Code 75052-5728  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 499.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111JGV5**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**B. Mayes, Cynthia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6230 Dolly Varden Ln  
 City Pollock Pines State CA Zip Code 95726-9017  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 436.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WK2T6**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**C. Mayes, Cynthia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6230 Dolly Varden Ln  
 City Pollock Pines State CA Zip Code 95726-9017  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 436.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WKFW7**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	15.00
<b>TOTAL</b> 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 169 OF 295
	<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. Mayes, Cynthia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6230 Dolly Varden Ln  
 City Pollock Pines State CA Zip Code 95726-9017  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 436.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WKM49**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**B. Mayes, Cynthia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6230 Dolly Varden Ln  
 City Pollock Pines State CA Zip Code 95726-9017  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 436.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WKTB7**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

**C. Mayes, Cynthia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6230 Dolly Varden Ln  
 City Pollock Pines State CA Zip Code 95726-9017  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 436.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WMK37**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	25.00
<b>TOTAL</b> 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 170 OF 295
	<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. Mayes, Cynthia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6230 Dolly Varden Ln  
 City Pollock Pines State CA Zip Code 95726-9017  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 436.00

Date of Receipt  
 02 / 08 / 2021  
**Transaction ID : VR08C10WMXW7**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**B. Mayes, Cynthia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6230 Dolly Varden Ln  
 City Pollock Pines State CA Zip Code 95726-9017  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 436.00

Date of Receipt  
 02 / 08 / 2021  
**Transaction ID : VR08C10WNF86**  
 Amount of Each Receipt this Period 3.00  
 Memo Item

**C. Mayes, Cynthia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6230 Dolly Varden Ln  
 City Pollock Pines State CA Zip Code 95726-9017  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 436.00

Date of Receipt  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y2P78**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	13.00
<b>TOTAL</b> 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 171 OF 295
	<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. Mayes, Cynthia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6230 Dolly Varden Ln  
 City Pollock Pines State CA Zip Code 95726-9017  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 436.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y32E8**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

**B. Mayes, Cynthia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6230 Dolly Varden Ln  
 City Pollock Pines State CA Zip Code 95726-9017  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 436.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y3561**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**C. Mayes, Cynthia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6230 Dolly Varden Ln  
 City Pollock Pines State CA Zip Code 95726-9017  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 436.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y3GR8**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	20.00
<b>TOTAL</b> 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 172 OF 295
	<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. Mayes, Cynthia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6230 Dolly Varden Ln  
 City Pollock Pines State CA Zip Code 95726-9017  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 436.00

Date of Receipt  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y4RX2**  
 Amount of Each Receipt this Period 12.00  
 Memo Item

**B. Mayes, Cynthia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6230 Dolly Varden Ln  
 City Pollock Pines State CA Zip Code 95726-9017  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 436.00

Date of Receipt  
 02 / 22 / 2021  
**Transaction ID : VR08C111F3R0**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**C. Mayes, Cynthia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6230 Dolly Varden Ln  
 City Pollock Pines State CA Zip Code 95726-9017  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 436.00

Date of Receipt  
 02 / 22 / 2021  
**Transaction ID : VR08C111F8C6**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	22.00
<b>TOTAL</b> 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 173 OF 295
	<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. Mayes, Cynthia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6230 Dolly Varden Ln  
 City Pollock Pines State CA Zip Code 95726-9017  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 436.00

Date of Receipt  
 02 / 22 / 2021  
**Transaction ID : VR08C111FGJ0**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**B. Mayes, Cynthia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6230 Dolly Varden Ln  
 City Pollock Pines State CA Zip Code 95726-9017  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 436.00

Date of Receipt  
 02 / 22 / 2021  
**Transaction ID : VR08C111FXE7**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**C. Mayes, Cynthia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6230 Dolly Varden Ln  
 City Pollock Pines State CA Zip Code 95726-9017  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 436.00

Date of Receipt  
 02 / 22 / 2021  
**Transaction ID : VR08C111GVE0**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	15.00
<b>TOTAL</b> 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 174 OF 295
	<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. Mayes, Cynthia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6230 Dolly Varden Ln  
 City Pollock Pines State CA Zip Code 95726-9017  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 436.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111HDM5**  
 Amount of Each Receipt this Period 8.00  
 Memo Item

**B. Mayes, Cynthia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6230 Dolly Varden Ln  
 City Pollock Pines State CA Zip Code 95726-9017  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 436.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111HFG9**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Mayes, Cynthia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6230 Dolly Varden Ln  
 City Pollock Pines State CA Zip Code 95726-9017  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 436.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111J370**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	23.00
<b>TOTAL</b> 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 175 OF 295
	(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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Mayes, Cynthia, , ,**

Mailing Address 6230 Dolly Varden Ln

City Pollock Pines	State CA	Zip Code 95726-9017
-----------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
436.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02		22		2021

**Transaction ID : VR08C111J388**

Amount of Each Receipt this Period  
5.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Mayes, Cynthia, , ,**

Mailing Address 6230 Dolly Varden Ln

City Pollock Pines	State CA	Zip Code 95726-9017
-----------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
436.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2021

**Transaction ID : VR08C111ZWF0**

Amount of Each Receipt this Period  
5.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. McDade, Georgia, , ,**

Mailing Address 4802 S Mead St

City Seattle	State WA	Zip Code 98118-2812
-----------------	-------------	------------------------

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 ▼  
1070.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2021

**Transaction ID : VR08C10WM164**

Amount of Each Receipt this Period  
35.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	45.00
<b>TOTAL</b> 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 176 OF 295
	<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. McDade, Georgia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4802 S Mead St  
 City Seattle State WA Zip Code 98118-2812  
 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 ▼ 1070.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111EYX8**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**B. McDade, Georgia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4802 S Mead St  
 City Seattle State WA Zip Code 98118-2812  
 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 ▼ 1070.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111GZX8**  
 Amount of Each Receipt this Period  
 35.00  
 Memo Item

**C. McDaniel, Carl, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 495 E College St  
 City Oberlin State OH Zip Code 44074-1318  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 386.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WJE30**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1060.00
<b>TOTAL</b> 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 177 OF 295
	(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. McDaniel, Carl, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 495 E College St  
 City Oberlin State OH Zip Code 44074-1318  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 386.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WJK66**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**B. McDaniel, Carl, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 495 E College St  
 City Oberlin State OH Zip Code 44074-1318  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 386.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WMBE8**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**C. McDaniel, Carl, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 495 E College St  
 City Oberlin State OH Zip Code 44074-1318  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 386.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WMBF6**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	35.00
<b>TOTAL</b> 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 178 OF 295
	<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. McDaniel, Carl, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 495 E College St  
 City Oberlin State OH Zip Code 44074-1318  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 386.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y26T5**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**B. McDaniel, Carl, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 495 E College St  
 City Oberlin State OH Zip Code 44074-1318  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 386.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y4647**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**C. McDaniel, Carl, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 495 E College St  
 City Oberlin State OH Zip Code 44074-1318  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 386.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y4B47**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	55.00
<b>TOTAL</b> 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 179 OF 295
	<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. McDaniel, Carl, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 495 E College St  
 City Oberlin State OH Zip Code 44074-1318  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 386.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y4B54**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**B. McDaniel, Carl, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 495 E College St  
 City Oberlin State OH Zip Code 44074-1318  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 386.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y4HM6**  
 Amount of Each Receipt this Period  
 35.00  
 Memo Item

**C. McDaniel, Carl, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 495 E College St  
 City Oberlin State OH Zip Code 44074-1318  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 386.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y4TA6**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	55.00
<b>TOTAL</b> 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 180 OF 295
	<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. McDaniel, Carl, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 495 E College St  
 City Oberlin State OH Zip Code 44074-1318  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 386.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111G2D9**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**B. McDaniel, Carl, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 495 E College St  
 City Oberlin State OH Zip Code 44074-1318  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 386.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111HSP6**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**C. McDaniel, Carl, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 495 E College St  
 City Oberlin State OH Zip Code 44074-1318  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 386.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111HWR9**  
 Amount of Each Receipt this Period 3.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	23.00
<b>TOTAL</b> 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 181 OF 295
	<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. McDaniel, Carl, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 495 E College St  
 City Oberlin State OH Zip Code 44074-1318  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 386.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1121AK8**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**B. McDaniel, Carl, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 495 E College St  
 City Oberlin State OH Zip Code 44074-1318  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 386.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1121Y90**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**C. Mcgrath, Cynthia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1801 Hoban Rd NW  
 City Washington State DC Zip Code 20007-2038  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WKYP4**  
 Amount of Each Receipt this Period 35.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	55.00
<b>TOTAL</b> 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 182 OF 295
	<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.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mcgrath, Cynthia, , ,

Mailing Address 1801 Hoban Rd NW

City Washington	State DC	Zip Code 20007-2038
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021

**Transaction ID : VR08C10WMCM6**

Amount of Each Receipt this Period  
15.00

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mcgrath, Cynthia, , ,

Mailing Address 1801 Hoban Rd NW

City Washington	State DC	Zip Code 20007-2038
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021

**Transaction ID : VR08C10Y5MS0**

Amount of Each Receipt this Period  
35.00

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mcgrath, Cynthia, , ,

Mailing Address 1801 Hoban Rd NW

City Washington	State DC	Zip Code 20007-2038
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021

**Transaction ID : VR08C111G122**

Amount of Each Receipt this Period  
10.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	60.00
<b>TOTAL</b> 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 183 OF 295
	<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. Mcgrath, Cynthia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1801 Hoban Rd NW  
 City Washington State DC Zip Code 20007-2038  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111GKM1**  
 Amount of Each Receipt this Period  
 35.00  
 Memo Item

**B. Mcgrath, Cynthia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1801 Hoban Rd NW  
 City Washington State DC Zip Code 20007-2038  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111GKN9**  
 Amount of Each Receipt this Period  
 35.00  
 Memo Item

**C. Mcgrath, Cynthia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1801 Hoban Rd NW  
 City Washington State DC Zip Code 20007-2038  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111GNN3**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	85.00
<b>TOTAL</b> 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 184 OF 295
	<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. Messenheimer, Margrit, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7333 Scotland Way  
 Unit 1108  
 City Sarasota State FL Zip Code 34238-8537  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 566.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WKHF0**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**B. Messenheimer, Margrit, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7333 Scotland Way  
 Unit 1108  
 City Sarasota State FL Zip Code 34238-8537  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 566.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y26A9**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**C. Messenheimer, Margrit, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7333 Scotland Way  
 Unit 1108  
 City Sarasota State FL Zip Code 34238-8537  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 566.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y26B7**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	45.00
<b>TOTAL</b> 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 185 OF 295
	<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. Messenheimer, Margrit, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7333 Scotland Way  
 Unit 1108  
 City Sarasota State FL Zip Code 34238-8537  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 566.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y2786**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

**B. Messenheimer, Margrit, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7333 Scotland Way  
 Unit 1108  
 City Sarasota State FL Zip Code 34238-8537  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 566.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y28N1**  
 Amount of Each Receipt this Period  
 3.00  
 Memo Item

**C. Messenheimer, Margrit, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7333 Scotland Way  
 Unit 1108  
 City Sarasota State FL Zip Code 34238-8537  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 566.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y2AD2**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	28.00
<b>TOTAL</b> 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 186 OF 295
	<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. Messenheimer, Margrit, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7333 Scotland Way  
 Unit 1108  
 City Sarasota State FL Zip Code 34238-8537  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 566.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y2N91**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**B. Messenheimer, Margrit, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7333 Scotland Way  
 Unit 1108  
 City Sarasota State FL Zip Code 34238-8537  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 566.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y3VK1**  
 Amount of Each Receipt this Period  
 35.00  
 Memo Item

**C. Messenheimer, Margrit, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7333 Scotland Way  
 Unit 1108  
 City Sarasota State FL Zip Code 34238-8537  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 566.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y45Z7**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	75.00
<b>TOTAL</b> 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 187 OF 295
	<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. Messenheimer, Margrit, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7333 Scotland Way  
 Unit 1108  
 City Sarasota State FL Zip Code 34238-8537  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 566.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111EXF6**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**B. Messenheimer, Margrit, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7333 Scotland Way  
 Unit 1108  
 City Sarasota State FL Zip Code 34238-8537  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 566.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111EXG4**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**C. Messenheimer, Margrit, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7333 Scotland Way  
 Unit 1108  
 City Sarasota State FL Zip Code 34238-8537  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 566.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111EXH2**  
 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)..... ▶

45.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 188 OF 295
	(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. Messenheimer, Margrit, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7333 Scotland Way  
 Unit 1108  
 City Sarasota State FL Zip Code 34238-8537  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 566.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111EXJ0**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**B. Messenheimer, Margrit, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7333 Scotland Way  
 Unit 1108  
 City Sarasota State FL Zip Code 34238-8537  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 566.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111EXK8**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**C. Messenheimer, Margrit, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7333 Scotland Way  
 Unit 1108  
 City Sarasota State FL Zip Code 34238-8537  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 566.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111F240**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	45.00
<b>TOTAL</b> 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 189 OF 295
	<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. Messenheimer, Margrit, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7333 Scotland Way  
 Unit 1108  
 City Sarasota State FL Zip Code 34238-8537  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 566.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111F301**  
 Amount of Each Receipt this Period  
 3.00  
 Memo Item

**B. Messenheimer, Margrit, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7333 Scotland Way  
 Unit 1108  
 City Sarasota State FL Zip Code 34238-8537  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 566.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111F5N0**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

**C. Messenheimer, Margrit, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7333 Scotland Way  
 Unit 1108  
 City Sarasota State FL Zip Code 34238-8537  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 566.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111FB41**  
 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)..... ▶

23.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 190 OF 295
	<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. Messenheimer, Margrit, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7333 Scotland Way  
 Unit 1108  
 City Sarasota State FL Zip Code 34238-8537  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 566.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111FRA4**  
 Amount of Each Receipt this Period  
 35.00  
 Memo Item

**B. Messenheimer, Margrit, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7333 Scotland Way  
 Unit 1108  
 City Sarasota State FL Zip Code 34238-8537  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 566.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111FZX9**  
 Amount of Each Receipt this Period  
 35.00  
 Memo Item

**C. Messenheimer, Margrit, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7333 Scotland Way  
 Unit 1108  
 City Sarasota State FL Zip Code 34238-8537  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 566.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111GXH7**  
 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)..... ▶

105.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 191 OF 295
	<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. Messenheimer, Margrit, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7333 Scotland Way  
 Unit 1108  
 City Sarasota State FL Zip Code 34238-8537  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 566.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111GXJ5**  
 Amount of Each Receipt this Period  
 35.00  
 Memo Item

**B. Messenheimer, Margrit, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7333 Scotland Way  
 Unit 1108  
 City Sarasota State FL Zip Code 34238-8537  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 566.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111JA17**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**C. Messenheimer, Margrit, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7333 Scotland Way  
 Unit 1108  
 City Sarasota State FL Zip Code 34238-8537  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 566.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C111ZJQ1**  
 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)..... ▶

55.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 192 OF 295
	<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. Messenheimer, Margrit, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7333 Scotland Way  
 Unit 1108  
 City Sarasota State FL Zip Code 34238-8537  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 566.00

Date of Receipt 02 / 28 / 2021  
**Transaction ID : VR08C1120ZA4**  
 Amount of Each Receipt this Period 35.00  
 Memo Item

**B. Messenheimer, Margrit, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7333 Scotland Way  
 Unit 1108  
 City Sarasota State FL Zip Code 34238-8537  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 566.00

Date of Receipt 02 / 28 / 2021  
**Transaction ID : VR08C1121HN8**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**C. Michael, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 701 King Farm Blvd  
 City Rockville State MD Zip Code 20850-6165  
 FEC ID number of contributing federal political 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 02 / 08 / 2021  
**Transaction ID : VR08C10WKAK6**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	100.00
<b>TOTAL</b> 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 193 OF 295
	(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. Michael, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 701 King Farm Blvd  
 City Rockville State MD Zip Code 20850-6165  
 FEC ID number of contributing federal political 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 / 08 / 2021  
**Transaction ID : VR08C10WKHB8**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**B. Michael, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 701 King Farm Blvd  
 City Rockville State MD Zip Code 20850-6165  
 FEC ID number of contributing federal political 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 / 08 / 2021  
**Transaction ID : VR08C10WMCJ0**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**C. Michael, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 701 King Farm Blvd  
 City Rockville State MD Zip Code 20850-6165  
 FEC ID number of contributing federal political 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 / 15 / 2021  
**Transaction ID : VR08C10Y3V92**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	80.00
<b>TOTAL</b> 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 194 OF 295
	<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. Milewski, Edward, , , Jr**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2965 Valmont Rd  
 Apt 203  
 City Boulder State CO Zip Code 80301-1300  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 252.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WJKC3**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**B. Milewski, Edward, , , Jr**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2965 Valmont Rd  
 Apt 203  
 City Boulder State CO Zip Code 80301-1300  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 252.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WMNN3**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**C. Milewski, Edward, , , Jr**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2965 Valmont Rd  
 Apt 203  
 City Boulder State CO Zip Code 80301-1300  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 252.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y2626**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	35.00
<b>TOTAL</b> 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 195 OF 295
	<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. Milewski, Edward, , , Jr**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2965 Valmont Rd  
Apt 203

City Boulder State CO Zip Code 80301-1300

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
252.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021

**Transaction ID : VR08C10Y2633**

Amount of Each Receipt this Period  
15.00

Memo Item

**B. Milewski, Edward, , , Jr**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2965 Valmont Rd  
Apt 203

City Boulder State CO Zip Code 80301-1300

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
252.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021

**Transaction ID : VR08C10Y2641**

Amount of Each Receipt this Period  
15.00

Memo Item

**C. Milewski, Edward, , , Jr**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2965 Valmont Rd  
Apt 203

City Boulder State CO Zip Code 80301-1300

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
252.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021

**Transaction ID : VR08C10Y46X4**

Amount of Each Receipt this Period  
15.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	45.00
<b>TOTAL</b> 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 196 OF 295
	<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. Milewski, Edward, , , Jr**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2965 Valmont Rd  
Apt 203

City Boulder State CO Zip Code 80301-1300

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
252.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021

**Transaction ID : VR08C10Y46Y2**

Amount of Each Receipt this Period  
15.00

Memo Item

**B. Milewski, Edward, , , Jr**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2965 Valmont Rd  
Apt 203

City Boulder State CO Zip Code 80301-1300

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
252.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021

**Transaction ID : VR08C10Y46Z0**

Amount of Each Receipt this Period  
15.00

Memo Item

**C. Milewski, Edward, , , Jr**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2965 Valmont Rd  
Apt 203

City Boulder State CO Zip Code 80301-1300

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
252.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021

**Transaction ID : VR08C10Y4RJ6**

Amount of Each Receipt this Period  
5.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	35.00
<b>TOTAL</b> 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 197 OF 295
	(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. Milewski, Edward, , , Jr**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2965 Valmont Rd  
Apt 203

City Boulder State CO Zip Code 80301-1300

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
252.50

Date of Receipt  
MM / DD / YYYY  
02 / 15 / 2021

**Transaction ID : VR08C10Y4X13**

Amount of Each Receipt this Period  
10.00

Memo Item

**B. Milewski, Edward, , , Jr**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2965 Valmont Rd  
Apt 203

City Boulder State CO Zip Code 80301-1300

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
252.50

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2021

**Transaction ID : VR08C111EYG7**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. Milewski, Edward, , , Jr**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2965 Valmont Rd  
Apt 203

City Boulder State CO Zip Code 80301-1300

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
252.50

Date of Receipt  
MM / DD / YYYY  
02 / 28 / 2021

**Transaction ID : VR08C11222E9**

Amount of Each Receipt this Period  
5.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	40.00
<b>TOTAL</b> 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 198 OF 295
	<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. Moore, Charles, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 75 Wapping Wood Rd  
 City Ellington State CT Zip Code 06029-3922  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 575.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WK2N6**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**B. Moore, Charles, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 75 Wapping Wood Rd  
 City Ellington State CT Zip Code 06029-3922  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 575.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WK539**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**C. Moore, Charles, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 75 Wapping Wood Rd  
 City Ellington State CT Zip Code 06029-3922  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 575.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WKPS9**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	15.00
<b>TOTAL</b> 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 199 OF 295
	<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. Moore, Charles, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 75 Wapping Wood Rd  
 City Ellington State CT Zip Code 06029-3922  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 575.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WMKE4**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

**B. Moore, Charles, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 75 Wapping Wood Rd  
 City Ellington State CT Zip Code 06029-3922  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 575.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WMKF2**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

**C. Moore, Charles, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 75 Wapping Wood Rd  
 City Ellington State CT Zip Code 06029-3922  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 575.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y2P36**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	25.00
<b>TOTAL</b> 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 200 OF 295
	<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. Moore, Charles, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 75 Wapping Wood Rd  
 City Ellington State CT Zip Code 06029-3922  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 575.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y3782**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**B. Moore, Charles, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 75 Wapping Wood Rd  
 City Ellington State CT Zip Code 06029-3922  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 575.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y3H84**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**C. Moore, Charles, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 75 Wapping Wood Rd  
 City Ellington State CT Zip Code 06029-3922  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 575.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y3H92**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	15.00
<b>TOTAL</b> 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 201 OF 295
	<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. Moore, Charles, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 75 Wapping Wood Rd  
 City Ellington State CT Zip Code 06029-3922  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 575.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y3W53**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**B. Moore, Charles, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 75 Wapping Wood Rd  
 City Ellington State CT Zip Code 06029-3922  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 575.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y4N49**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**C. Moore, Charles, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 75 Wapping Wood Rd  
 City Ellington State CT Zip Code 06029-3922  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 575.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y4N56**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	15.00
<b>TOTAL</b> 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 202 OF 295
	<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. Moore, Charles, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 75 Wapping Wood Rd  
 City Ellington State CT Zip Code 06029-3922  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 575.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y4N64**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**B. Moore, Charles, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 75 Wapping Wood Rd  
 City Ellington State CT Zip Code 06029-3922  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 575.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y4RS1**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

**C. Moore, Charles, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 75 Wapping Wood Rd  
 City Ellington State CT Zip Code 06029-3922  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 575.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111EZT7**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	20.00
<b>TOTAL</b> 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 203 OF 295
	<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. Moore, Charles, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 75 Wapping Wood Rd  
 City Ellington State CT Zip Code 06029-3922  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 575.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111EZV5**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**B. Moore, Charles, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 75 Wapping Wood Rd  
 City Ellington State CT Zip Code 06029-3922  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 575.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111G359**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**C. Moore, Charles, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 75 Wapping Wood Rd  
 City Ellington State CT Zip Code 06029-3922  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 575.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111H110**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	25.00
<b>TOTAL</b> 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 204 OF 295
	<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. Moore, Charles, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 75 Wapping Wood Rd

City Ellington	State CT	Zip Code 06029-3922
-------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
575.50

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	22	/	2021

**Transaction ID : VR08C111HFC7**

Amount of Each Receipt this Period  
5.00

Memo Item

**B. Moore, Charles, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 75 Wapping Wood Rd

City Ellington	State CT	Zip Code 06029-3922
-------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
575.50

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2021

**Transaction ID : VR08C1121W07**

Amount of Each Receipt this Period  
10.00

Memo Item

**C. Moore, Charles, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 75 Wapping Wood Rd

City Ellington	State CT	Zip Code 06029-3922
-------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
575.50

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2021

**Transaction ID : VR08C11224H6**

Amount of Each Receipt this Period  
5.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	20.00
<b>TOTAL</b> 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 205 OF 295
	<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. Moore, Charles, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 75 Wapping Wood Rd  
 City Ellington State CT Zip Code 06029-3922  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 575.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C11224J4**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**B. Morgenstern, Mary Jo, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 246 W End Ave  
 City New York State NY Zip Code 10023-3618  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Premise Occupation (for Individual) Physician  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WKA06**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**C. Morrison, Richard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 501 Via Casitas Apt 714  
 City Greenbrae State CA Zip Code 94904-1934  
 FEC ID number of contributing federal political 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 / 08 / 2021  
**Transaction ID : VR08C10WK6C3**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	110.00
<b>TOTAL</b> 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 206 OF 295
	<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. Morrison, Richard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 501 Via Casitas Apt 714  
 City Greenbrae State CA Zip Code 94904-1934  
 FEC ID number of contributing federal political 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 / 22 / 2021  
**Transaction ID : VR08C111G1C9**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**B. Nowinske, Debbie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11C Castle Hill Rd  
 City Agawam State MA Zip Code 01001-2471  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 324.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WK4R3**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**C. Nowinske, Debbie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11C Castle Hill Rd  
 City Agawam State MA Zip Code 01001-2471  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 324.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WK7Z4**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	120.00
<b>TOTAL</b> 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 207 OF 295
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A. Nowinske, Debbie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11C Castle Hill Rd  
 City Agawam State MA Zip Code 01001-2471  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 324.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WM003**  
 Amount of Each Receipt this Period  
 3.00  
 Memo Item

**B. Nowinske, Debbie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11C Castle Hill Rd  
 City Agawam State MA Zip Code 01001-2471  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 324.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WMH83**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**C. Nowinske, Debbie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11C Castle Hill Rd  
 City Agawam State MA Zip Code 01001-2471  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 324.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WMH91**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	33.00
<b>TOTAL</b> 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 208 OF 295
	<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. Nowinske, Debbie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11C Castle Hill Rd  
 City Agawam State MA Zip Code 01001-2471  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 324.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WN550**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**B. Nowinske, Debbie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11C Castle Hill Rd  
 City Agawam State MA Zip Code 01001-2471  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 324.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WN568**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**C. Nowinske, Debbie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11C Castle Hill Rd  
 City Agawam State MA Zip Code 01001-2471  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 324.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WN576**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	15.00
<b>TOTAL</b> 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 209 OF 295
	<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. Nowinske, Debbie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11C Castle Hill Rd  
 City Agawam State MA Zip Code 01001-2471  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 324.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y2X73**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

**B. Nowinske, Debbie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11C Castle Hill Rd  
 City Agawam State MA Zip Code 01001-2471  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 324.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y37N5**  
 Amount of Each Receipt this Period  
 20.00  
 Memo Item

**C. Nowinske, Debbie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11C Castle Hill Rd  
 City Agawam State MA Zip Code 01001-2471  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 324.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y3WZ9**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	40.00
<b>TOTAL</b> 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 210 OF 295
	<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. Nowinske, Debbie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11C Castle Hill Rd  
 City Agawam State MA Zip Code 01001-2471  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 324.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111FN08**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**B. Nowinske, Debbie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11C Castle Hill Rd  
 City Agawam State MA Zip Code 01001-2471  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 324.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111FRZ9**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**C. Nowinske, Debbie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11C Castle Hill Rd  
 City Agawam State MA Zip Code 01001-2471  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 324.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111FZC5**  
 Amount of Each Receipt this Period  
 20.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	30.00
<b>TOTAL</b> 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 211 OF 295
	<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. Nowinske, Debbie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11C Castle Hill Rd  
 City Agawam State MA Zip Code 01001-2471  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 324.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111HGK3**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

**B. Nowinske, Debbie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11C Castle Hill Rd  
 City Agawam State MA Zip Code 01001-2471  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 324.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111HVJ0**  
 Amount of Each Receipt this Period  
 3.00  
 Memo Item

**C. Panepinto, Paul, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1 Regency PI Unit 220  
 City Woodbridge State NJ Zip Code 07095-1027  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 20.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111FP68**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1013.00
<b>TOTAL</b> 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 212 OF 295
	<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. Panvini, Alla, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11195 E Baltic Dr  
 City Aurora State CO Zip Code 80014-1071  
 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 ▼ 283.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WJFX8**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**B. Panvini, Alla, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11195 E Baltic Dr  
 City Aurora State CO Zip Code 80014-1071  
 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 ▼ 283.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WND2**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**C. Panvini, Alla, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11195 E Baltic Dr  
 City Aurora State CO Zip Code 80014-1071  
 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 ▼ 283.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WNDE0**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	15.00
<b>TOTAL</b> 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 213 OF 295
	<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

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. Panvini, Alla, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11195 E Baltic Dr  
 City Aurora State CO Zip Code 80014-1071  
 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 ▼ 283.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WNWAO**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**B. Partington, Raymond, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 384 Pringle Rd  
 City Jacksonville State FL Zip Code 32234-3011  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C111ZBR5**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C. Perkins, Carolyn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2908 Prescott Ave Apt 208  
 City Dayton State OH Zip Code 45406-2727  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C111ZSN1**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1505.00
<b>TOTAL</b> 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 214 OF 295
	(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. Pierangelo, Jackie, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 316 Park Ave

City Manhasset	State NY	Zip Code 11030-2417
-------------------	-------------	------------------------

FEC ID number of contributing federal political 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  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	22	/	2021

**Transaction ID : VR08C111FR96**

Amount of Each Receipt this Period  
35.00

Memo Item

**B. Pierangelo, Jackie, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 316 Park Ave

City Manhasset	State NY	Zip Code 11030-2417
-------------------	-------------	------------------------

FEC ID number of contributing federal political 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  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2021

**Transaction ID : VR08C111Z7H1**

Amount of Each Receipt this Period  
25.00

Memo Item

**C. Powell, Brabara, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 66 S Eagle Rd  
Apt D5

City Havertown	State PA	Zip Code 19083-3241
-------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
523.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	08	/	2021

**Transaction ID : VR08C10WMN41**

Amount of Each Receipt this Period  
5.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	65.00
<b>TOTAL</b> 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 215 OF 295
	<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. Powell, Brabara, , ,**

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

Mailing Address 66 S Eagle Rd  
Apt D5

City Havertown State PA Zip Code 19083-3241

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
523.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021

**Transaction ID : VR08C10Y2QG2**

Amount of Each Receipt this Period  
5.00

Memo Item

**B. Powell, Brabara, , ,**

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

Mailing Address 66 S Eagle Rd  
Apt D5

City Havertown State PA Zip Code 19083-3241

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
523.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021

**Transaction ID : VR08C10Y5NG2**

Amount of Each Receipt this Period  
4.00

Memo Item

**C. Powell, Brabara, , ,**

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

Mailing Address 66 S Eagle Rd  
Apt D5

City Havertown State PA Zip Code 19083-3241

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
523.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021

**Transaction ID : VR08C1121DJ5**

Amount of Each Receipt this Period  
500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	509.00
<b>TOTAL</b> 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 216 OF 295
	<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. Ramsay Merriam, Caroline, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1316 30Th St NW  
 City Washington State DC Zip Code 20007-3343  
 FEC ID number of contributing federal political 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 / 08 / 2021  
**Transaction ID : VR08C10WKDQ4**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**B. Ramsay Merriam, Caroline, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1316 30Th St NW  
 City Washington State DC Zip Code 20007-3343  
 FEC ID number of contributing federal political 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 / 08 / 2021  
**Transaction ID : VR08C10WNCS4**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**C. Ramsay Merriam, Caroline, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1316 30Th St NW  
 City Washington State DC Zip Code 20007-3343  
 FEC ID number of contributing federal political 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 / 15 / 2021  
**Transaction ID : VR08C10Y3MZ0**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	35.00
<b>TOTAL</b> 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 217 OF 295		
	<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.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Ramsay Merriam, Caroline, , ,

Mailing Address 1316 30Th St NW

City Washington	State DC	Zip Code 20007-3343
--------------------	-------------	------------------------

FEC ID number of contributing federal political 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 / 22 / 2021

**Transaction ID : VR08C111JP20**

Amount of Each Receipt this Period  
15.00

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Ramsay Merriam, Caroline, , ,

Mailing Address 1316 30Th St NW

City Washington	State DC	Zip Code 20007-3343
--------------------	-------------	------------------------

FEC ID number of contributing federal political 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 / 28 / 2021

**Transaction ID : VR08C111ZV01**

Amount of Each Receipt this Period  
25.00

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Ramsay Merriam, Caroline, , ,

Mailing Address 1316 30Th St NW

City Washington	State DC	Zip Code 20007-3343
--------------------	-------------	------------------------

FEC ID number of contributing federal political 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 / 28 / 2021

**Transaction ID : VR08C1122VE3**

Amount of Each Receipt this Period  
5.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	45.00
<b>TOTAL</b> 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 218 OF 295
	<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. Reaka, Ken, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3210 Meridian Way S  
 Apt 9  
 City Palm Beach Gardens State FL Zip Code 33410-5047  
 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 ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WJH60**  
 Amount of Each Receipt this Period  
 3.00  
 Memo Item

**B. Reaka, Ken, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3210 Meridian Way S  
 Apt 9  
 City Palm Beach Gardens State FL Zip Code 33410-5047  
 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 ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WJH78**  
 Amount of Each Receipt this Period  
 3.00  
 Memo Item

**C. Reaka, Ken, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3210 Meridian Way S  
 Apt 9  
 City Palm Beach Gardens State FL Zip Code 33410-5047  
 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 ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WJK32**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	11.00
<b>TOTAL</b> 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 219 OF 295
	<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. Reaka, Ken, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3210 Meridian Way S  
 Apt 9  
 City Palm Beach Gardens State FL Zip Code 33410-5047  
 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 ▼ 250.00

Date of Receipt  
 02 / 08 / 2021  
**Transaction ID : VR08C10WJKR6**  
 Amount of Each Receipt this Period 3.00  
 Memo Item

**B. Reaka, Ken, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3210 Meridian Way S  
 Apt 9  
 City Palm Beach Gardens State FL Zip Code 33410-5047  
 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 ▼ 250.00

Date of Receipt  
 02 / 08 / 2021  
**Transaction ID : VR08C10WJKS4**  
 Amount of Each Receipt this Period 3.00  
 Memo Item

**C. Reaka, Ken, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3210 Meridian Way S  
 Apt 9  
 City Palm Beach Gardens State FL Zip Code 33410-5047  
 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 ▼ 250.00

Date of Receipt  
 02 / 08 / 2021  
**Transaction ID : VR08C10WKQF3**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	11.00
<b>TOTAL</b> 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 220 OF 295
<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. Reaka, Ken, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3210 Meridian Way S  
Apt 9

City Palm Beach Gardens	State FL	Zip Code 33410-5047
----------------------------	-------------	------------------------

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 ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
02 / 08 / 2021

**Transaction ID : VR08C10WKTK1**

Amount of Each Receipt this Period  
7.00

Memo Item

**B. Reaka, Ken, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3210 Meridian Way S  
Apt 9

City Palm Beach Gardens	State FL	Zip Code 33410-5047
----------------------------	-------------	------------------------

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 ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
02 / 15 / 2021

**Transaction ID : VR08C10Y43M7**

Amount of Each Receipt this Period  
3.00

Memo Item

**C. Reaka, Ken, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3210 Meridian Way S  
Apt 9

City Palm Beach Gardens	State FL	Zip Code 33410-5047
----------------------------	-------------	------------------------

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 ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
02 / 28 / 2021

**Transaction ID : VR08C111ZNX5**

Amount of Each Receipt this Period  
5.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	15.00
<b>TOTAL</b> 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 221 OF 295
	<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. Reaka, Ken, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3210 Meridian Way S  
 Apt 9  
 City Palm Beach Gardens State FL Zip Code 33410-5047  
 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 ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C111ZR20**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**B. Reaka, Ken, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3210 Meridian Way S  
 Apt 9  
 City Palm Beach Gardens State FL Zip Code 33410-5047  
 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 ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1120FX1**  
 Amount of Each Receipt this Period  
 4.00  
 Memo Item

**C. Reaka, Ken, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3210 Meridian Way S  
 Apt 9  
 City Palm Beach Gardens State FL Zip Code 33410-5047  
 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 ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1120TY1**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	24.00
<b>TOTAL</b> 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 222 OF 295
	<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. Reaka, Ken, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3210 Meridian Way S  
 Apt 9  
 City Palm Beach Gardens State FL Zip Code 33410-5047  
 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 ▼ 250.00

Date of Receipt 02 / 28 / 2021  
**Transaction ID : VR08C1122YM6**  
 Amount of Each Receipt this Period 3.00  
 Memo Item

**B. Reddout, Martha, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 326 Cayuga Creek Rd  
 City Alden State NY Zip Code 14004-8700  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 207.50

Date of Receipt 02 / 08 / 2021  
**Transaction ID : VR08C10WKF31**  
 Amount of Each Receipt this Period 35.00  
 Memo Item

**C. Reddout, Martha, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 326 Cayuga Creek Rd  
 City Alden State NY Zip Code 14004-8700  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 207.50

Date of Receipt 02 / 15 / 2021  
**Transaction ID : VR08C10Y2PM1**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	53.00
<b>TOTAL</b> 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 223 OF 295
	<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. Reddout, Martha, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 326 Cayuga Creek Rd  
 City Alden State NY Zip Code 14004-8700  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 207.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111G003**  
 Amount of Each Receipt this Period  
 35.00  
 Memo Item

**B. Reed, Karen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Glenwood Cir  
 City Wilmington State OH Zip Code 45177-2588  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Therapist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WME79**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**C. Reed, Karen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Glenwood Cir  
 City Wilmington State OH Zip Code 45177-2588  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Therapist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y30N9**  
 Amount of Each Receipt this Period  
 35.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	85.00
<b>TOTAL</b> 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 224 OF 295
	<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. Reed, Karen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Glenwood Cir  
 City Wilmington State OH Zip Code 45177-2588  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Therapist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y4PY5**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**B. Reed, Karen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Glenwood Cir  
 City Wilmington State OH Zip Code 45177-2588  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Therapist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111EX40**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**C. Reed, Karen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Glenwood Cir  
 City Wilmington State OH Zip Code 45177-2588  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Therapist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111EX57**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	45.00
<b>TOTAL</b> 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 225 OF 295
	<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. Reed, Karen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Glenwood Cir  
 City Wilmington State OH Zip Code 45177-2588  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Therapist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111F257**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**B. Reed, Karen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Glenwood Cir  
 City Wilmington State OH Zip Code 45177-2588  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Therapist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111F8T6**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**C. Reed, Karen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Glenwood Cir  
 City Wilmington State OH Zip Code 45177-2588  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Therapist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111FJR1**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	45.00
<b>TOTAL</b> 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 226 OF 295
	<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. Reed, Karen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Glenwood Cir  
 City Wilmington State OH Zip Code 45177-2588  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Therapist  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 385.00

Date of Receipt 02 / 22 / 2021  
**Transaction ID : VR08C111FNB5**  
 Amount of Each Receipt this Period 35.00  
 Memo Item

**B. Reed, Karen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Glenwood Cir  
 City Wilmington State OH Zip Code 45177-2588  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Therapist  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 385.00

Date of Receipt 02 / 22 / 2021  
**Transaction ID : VR08C111FNC3**  
 Amount of Each Receipt this Period 35.00  
 Memo Item

**C. Reed, Karen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Glenwood Cir  
 City Wilmington State OH Zip Code 45177-2588  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Therapist  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 385.00

Date of Receipt 02 / 22 / 2021  
**Transaction ID : VR08C111G2S4**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	85.00
<b>TOTAL</b> 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 227 OF 295
	<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. Reed, Karen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Glenwood Cir  
 City Wilmington State OH Zip Code 45177-2588  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Therapist  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 385.00

Date of Receipt 02 / 22 / 2021  
**Transaction ID : VR08C111GDH5**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Reed, Karen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Glenwood Cir  
 City Wilmington State OH Zip Code 45177-2588  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Therapist  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 385.00

Date of Receipt 02 / 22 / 2021  
**Transaction ID : VR08C111H6G1**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**C. Reed, Karen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Glenwood Cir  
 City Wilmington State OH Zip Code 45177-2588  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Therapist  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 385.00

Date of Receipt 02 / 22 / 2021  
**Transaction ID : VR08C111H942**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	80.00
<b>TOTAL</b> 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 228 OF 295
	<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. Reed, Karen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Glenwood Cir  
 City Wilmington State OH Zip Code 45177-2588  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Therapist  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 385.00

Date of Receipt 02 / 22 / 2021  
**Transaction ID : VR08C111HMV6**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**B. Reed, Karen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Glenwood Cir  
 City Wilmington State OH Zip Code 45177-2588  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Therapist  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 385.00

Date of Receipt 02 / 22 / 2021  
**Transaction ID : VR08C111HMW4**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**C. Reed, Karen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Glenwood Cir  
 City Wilmington State OH Zip Code 45177-2588  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Therapist  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 385.00

Date of Receipt 02 / 22 / 2021  
**Transaction ID : VR08C111HMX2**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	45.00
<b>TOTAL</b> 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 229 OF 295
	<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. Reed, Karen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Glenwood Cir  
 City Wilmington State OH Zip Code 45177-2588  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Therapist  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 385.00

Date of Receipt  
 02 / 22 / 2021  
**Transaction ID : VR08C111HMY0**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**B. Reed, Karen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Glenwood Cir  
 City Wilmington State OH Zip Code 45177-2588  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Therapist  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 385.00

Date of Receipt  
 02 / 22 / 2021  
**Transaction ID : VR08C111HXR1**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**C. Reed, Karen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Glenwood Cir  
 City Wilmington State OH Zip Code 45177-2588  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Therapist  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 385.00

Date of Receipt  
 02 / 28 / 2021  
**Transaction ID : VR08C1121PR3**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	35.00
<b>TOTAL</b> 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 230 OF 295
	<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. Roepke, Judith, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5801 W Bethel Ave  
 City Muncie State IN Zip Code 47304-9549  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 02 / 08 / 2021  
**Transaction ID : VR08C10WJD97**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**B. Roepke, Judith, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5801 W Bethel Ave  
 City Muncie State IN Zip Code 47304-9549  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 02 / 08 / 2021  
**Transaction ID : VR08C10WKYR9**  
 Amount of Each Receipt this Period 35.00  
 Memo Item

**C. Roepke, Judith, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5801 W Bethel Ave  
 City Muncie State IN Zip Code 47304-9549  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 02 / 08 / 2021  
**Transaction ID : VR08C10WMB80**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	65.00
<b>TOTAL</b> 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 231 OF 295
	<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. Roepke, Judith, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5801 W Bethel Ave  
 City Muncie State IN Zip Code 47304-9549  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WMQQ4**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**B. Roepke, Judith, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5801 W Bethel Ave  
 City Muncie State IN Zip Code 47304-9549  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WMQR2**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**C. Roepke, Judith, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5801 W Bethel Ave  
 City Muncie State IN Zip Code 47304-9549  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WNTN4**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	35.00
<b>TOTAL</b> 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 232 OF 295
	<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. Roepke, Judith, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5801 W Bethel Ave  
 City Muncie State IN Zip Code 47304-9549  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 02 / 15 / 2021  
**Transaction ID : VR08C10Y4M20**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**B. Roepke, Judith, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5801 W Bethel Ave  
 City Muncie State IN Zip Code 47304-9549  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 02 / 15 / 2021  
**Transaction ID : VR08C10Y4XV6**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**C. Roepke, Judith, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5801 W Bethel Ave  
 City Muncie State IN Zip Code 47304-9549  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 02 / 28 / 2021  
**Transaction ID : VR08C1121AR8**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	35.00
<b>TOTAL</b> 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 233 OF 295
	<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. Roepke, Judith, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5801 W Bethel Ave  
 City Muncie State IN Zip Code 47304-9549  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 02 / 28 / 2021  
**Transaction ID : VR08C1121AS6**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**B. Schoemehl, Mary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 701 Mirror Lake Dr N Apt 120  
 City Saint Petersburg State FL Zip Code 33701-3257  
 FEC ID number of contributing federal political 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 02 / 08 / 2021  
**Transaction ID : VR08C10WJQT1**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Schoemehl, Mary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 701 Mirror Lake Dr N Apt 120  
 City Saint Petersburg State FL Zip Code 33701-3257  
 FEC ID number of contributing federal political 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 02 / 08 / 2021  
**Transaction ID : VR08C10WJT93**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	55.00
<b>TOTAL</b> 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 234 OF 295
	<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. Schoemehl, Mary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 701 Mirror Lake Dr N  
Apt 120

City Saint Petersburg State FL Zip Code 33701-3257

FEC ID number of contributing federal political 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  
 02 / 08 / 2021  
**Transaction ID : VR08C10WJTA1**

Amount of Each Receipt this Period  
15.00

Memo Item

**B. Schoemehl, Mary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 701 Mirror Lake Dr N  
Apt 120

City Saint Petersburg State FL Zip Code 33701-3257

FEC ID number of contributing federal political 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  
 02 / 08 / 2021  
**Transaction ID : VR08C10WMBX6**

Amount of Each Receipt this Period  
15.00

Memo Item

**C. Schoemehl, Mary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 701 Mirror Lake Dr N  
Apt 120

City Saint Petersburg State FL Zip Code 33701-3257

FEC ID number of contributing federal political 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  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y3Q95**

Amount of Each Receipt this Period  
15.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	45.00
<b>TOTAL</b> 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 235 OF 295
	<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. Schoemehl, Mary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 701 Mirror Lake Dr N  
Apt 120

City Saint Petersburg State FL Zip Code 33701-3257

FEC ID number of contributing federal political 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 / 15 / 2021

**Transaction ID : VR08C10Y5S38**

Amount of Each Receipt this Period  
5.00

Memo Item

**B. Schoemehl, Mary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 701 Mirror Lake Dr N  
Apt 120

City Saint Petersburg State FL Zip Code 33701-3257

FEC ID number of contributing federal political 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 / 22 / 2021

**Transaction ID : VR08C111GCV1**

Amount of Each Receipt this Period  
5.00

Memo Item

**C. Schoemehl, Mary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 701 Mirror Lake Dr N  
Apt 120

City Saint Petersburg State FL Zip Code 33701-3257

FEC ID number of contributing federal political 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 / 22 / 2021

**Transaction ID : VR08C111HSJ5**

Amount of Each Receipt this Period  
15.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	25.00
<b>TOTAL</b> 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 236 OF 295
	<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. Schoemehl, Mary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 701 Mirror Lake Dr N  
Apt 120

City Saint Petersburg	State FL	Zip Code 33701-3257
--------------------------	-------------	------------------------

FEC ID number of contributing federal political 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 / 2021

**Transaction ID : VR08C111ZEM0**

Amount of Each Receipt this Period  
15.00

Memo Item

**B. Schoemehl, Mary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 701 Mirror Lake Dr N  
Apt 120

City Saint Petersburg	State FL	Zip Code 33701-3257
--------------------------	-------------	------------------------

FEC ID number of contributing federal political 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 / 2021

**Transaction ID : VR08C1120J16**

Amount of Each Receipt this Period  
15.00

Memo Item

**C. Seely, Elizabeth, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 69 Danbury Cir S

City Rochester	State NY	Zip Code 14618-2719
-------------------	-------------	------------------------

FEC ID number of contributing federal political 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  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021

**Transaction ID : VR08C10WKB58**

Amount of Each Receipt this Period  
5.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	35.00
<b>TOTAL</b> 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 237 OF 295
	<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. Seely, Elizabeth, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 69 Danbury Cir S  
 City Rochester State NY Zip Code 14618-2719  
 FEC ID number of contributing federal political 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  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WKSJ0**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**B. Seely, Elizabeth, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 69 Danbury Cir S  
 City Rochester State NY Zip Code 14618-2719  
 FEC ID number of contributing federal political 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  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WKSJ8**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**C. Seely, Elizabeth, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 69 Danbury Cir S  
 City Rochester State NY Zip Code 14618-2719  
 FEC ID number of contributing federal political 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  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WM1S4**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	65.00
<b>TOTAL</b> 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 238 OF 295
	<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. Seely, Elizabeth, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 69 Danbury Cir S  
 City Rochester State NY Zip Code 14618-2719  
 FEC ID number of contributing federal political 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  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WM1T2**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**B. Seely, Elizabeth, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 69 Danbury Cir S  
 City Rochester State NY Zip Code 14618-2719  
 FEC ID number of contributing federal political 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  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y5RV5**  
 Amount of Each Receipt this Period  
 6.00  
 Memo Item

**C. Seely, Elizabeth, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 69 Danbury Cir S  
 City Rochester State NY Zip Code 14618-2719  
 FEC ID number of contributing federal political 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  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1121N19**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	36.00
<b>TOTAL</b> 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 239 OF 295
	<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. Sibbersen, Janet, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 412 Bethany Dr  
 City Mechanicsburg State PA Zip Code 17055-4313  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 503.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C11215H2**  
 Amount of Each Receipt this Period  
 3.00  
 Memo Item

**B. Sibbersen, Janet, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 412 Bethany Dr  
 City Mechanicsburg State PA Zip Code 17055-4313  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 503.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1121DH7**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C. Simpson, Vickie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 585 Juneau Dr SE  
 City Salem State OR Zip Code 97302-3967  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WM9S9**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	528.00
<b>TOTAL</b> 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 240 OF 295
	<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. Simpson, Vickie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 585 Juneau Dr SE  
 City Salem State OR Zip Code 97302-3967  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WMFJ7**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**B. Simpson, Vickie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 585 Juneau Dr SE  
 City Salem State OR Zip Code 97302-3967  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y2S90**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**C. Simpson, Vickie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 585 Juneau Dr SE  
 City Salem State OR Zip Code 97302-3967  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y3PX0**  
 Amount of Each Receipt this Period  
 20.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	50.00
<b>TOTAL</b> 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 241 OF 295
	<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. Simpson, Vickie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 585 Juneau Dr SE  
 City Salem State OR Zip Code 97302-3967  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y4EX0**  
 Amount of Each Receipt this Period  
 20.00  
 Memo Item

**B. Simpson, Vickie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 585 Juneau Dr SE  
 City Salem State OR Zip Code 97302-3967  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111HB79**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**C. Simpson, Vickie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 585 Juneau Dr SE  
 City Salem State OR Zip Code 97302-3967  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111HB87**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	50.00
<b>TOTAL</b> 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 242 OF 295
	<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. Skinner, Ilene, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 62715 E Border Rock Rd  
 City Tucson State AZ Zip Code 85739-2464  
 FEC ID number of contributing federal political 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 / 08 / 2021  
**Transaction ID : VR08C10WM9F0**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**B. Skinner, Ilene, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 62715 E Border Rock Rd  
 City Tucson State AZ Zip Code 85739-2464  
 FEC ID number of contributing federal political 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 / 08 / 2021  
**Transaction ID : VR08C10WM9G8**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**C. Skinner, Ilene, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 62715 E Border Rock Rd  
 City Tucson State AZ Zip Code 85739-2464  
 FEC ID number of contributing federal political 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 / 15 / 2021  
**Transaction ID : VR08C10Y3106**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	45.00
<b>TOTAL</b> 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 243 OF 295
	<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. Skinner, Ilene, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 62715 E Border Rock Rd  
 City Tucson State AZ Zip Code 85739-2464  
 FEC ID number of contributing federal political 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 / 28 / 2021  
**Transaction ID : VR08C112K10**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**B. Skinner, Ilene, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 62715 E Border Rock Rd  
 City Tucson State AZ Zip Code 85739-2464  
 FEC ID number of contributing federal political 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 / 28 / 2021  
**Transaction ID : VR08C11201S8**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**C. Smith, Maria, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6541 Brooks Pl  
 City Falls Church State VA Zip Code 22044-1106  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 515.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WJEB3**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	280.00
<b>TOTAL</b> 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 244 OF 295
	<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. Snively, Susan, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 366 S Pleasant St

City Amherst	State MA	Zip Code 01002-2538
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Emily Dickinson Museum	Occupation (for Individual) Writer
---	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	15	/	2021

**Transaction ID : VR08C10Y25B6**

Amount of Each Receipt this Period  
15.00

Memo Item

**B. Snively, Susan, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 366 S Pleasant St

City Amherst	State MA	Zip Code 01002-2538
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Emily Dickinson Museum	Occupation (for Individual) Writer
---	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	15	/	2021

**Transaction ID : VR08C10Y25C4**

Amount of Each Receipt this Period  
15.00

Memo Item

**C. Snively, Susan, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 366 S Pleasant St

City Amherst	State MA	Zip Code 01002-2538
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Emily Dickinson Museum	Occupation (for Individual) Writer
---	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	15	/	2021

**Transaction ID : VR08C10Y53B4**

Amount of Each Receipt this Period  
15.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	45.00
<b>TOTAL</b> 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 245 OF 295
	<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. Snively, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 366 S Pleasant St  
 City Amherst State MA Zip Code 01002-2538  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Emily Dickinson Museum Occupation (for Individual) Writer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111EYE1**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**B. Snively, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 366 S Pleasant St  
 City Amherst State MA Zip Code 01002-2538  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Emily Dickinson Museum Occupation (for Individual) Writer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111GG30**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**C. Snively, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 366 S Pleasant St  
 City Amherst State MA Zip Code 01002-2538  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Emily Dickinson Museum Occupation (for Individual) Writer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C111Z7Z1**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	45.00
<b>TOTAL</b> 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 246 OF 295
	(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. Snively, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 366 S Pleasant St  
 City Amherst State MA Zip Code 01002-2538  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Emily Dickinson Museum Occupation (for Individual) Writer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 02 / 28 / 2021  
**Transaction ID : VR08C1122XK5**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**B. Solzman, Bamboo, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5455 S Hyde Park Blvd  
 City Chicago State IL Zip Code 60615-5805  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 288.00

Date of Receipt 02 / 08 / 2021  
**Transaction ID : VR08C10WJD55**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**C. Solzman, Bamboo, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5455 S Hyde Park Blvd  
 City Chicago State IL Zip Code 60615-5805  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 288.00

Date of Receipt 02 / 08 / 2021  
**Transaction ID : VR08C10WJFG6**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	35.00
<b>TOTAL</b> 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 247 OF 295
	<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. Solzman, Bamboo, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5455 S Hyde Park Blvd  
 City Chicago State IL Zip Code 60615-5805  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 288.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WJPG1**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**B. Solzman, Bamboo, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5455 S Hyde Park Blvd  
 City Chicago State IL Zip Code 60615-5805  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 288.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WKV53**  
 Amount of Each Receipt this Period 3.50  
 Memo Item

**C. Solzman, Bamboo, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5455 S Hyde Park Blvd  
 City Chicago State IL Zip Code 60615-5805  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 288.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y2N69**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	33.50
<b>TOTAL</b> 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 248 OF 295
	<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. Solzman, Bamboo, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5455 S Hyde Park Blvd  
 City Chicago State IL Zip Code 60615-5805  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 288.00

Date of Receipt 02 / 15 / 2021  
**Transaction ID : VR08C10Y3RH9**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**B. Solzman, Bamboo, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5455 S Hyde Park Blvd  
 City Chicago State IL Zip Code 60615-5805  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 288.00

Date of Receipt 02 / 15 / 2021  
**Transaction ID : VR08C10Y52V8**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**C. Solzman, Bamboo, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5455 S Hyde Park Blvd  
 City Chicago State IL Zip Code 60615-5805  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 288.00

Date of Receipt 02 / 22 / 2021  
**Transaction ID : VR08C111EYH5**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	35.00
<b>TOTAL</b> 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 249 OF 295
	<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. Solzman, Bamboo, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5455 S Hyde Park Blvd  
 City Chicago State IL Zip Code 60615-5805  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 288.00

Date of Receipt 02 / 22 / 2021  
**Transaction ID : VR08C111F2F6**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**B. Solzman, Bamboo, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5455 S Hyde Park Blvd  
 City Chicago State IL Zip Code 60615-5805  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 288.00

Date of Receipt 02 / 22 / 2021  
**Transaction ID : VR08C111JNY9**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**C. Solzman, Bamboo, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5455 S Hyde Park Blvd  
 City Chicago State IL Zip Code 60615-5805  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 288.00

Date of Receipt 02 / 28 / 2021  
**Transaction ID : VR08C11205V3**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	35.00
<b>TOTAL</b> 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 250 OF 295
	<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. Solzman, Bamboo, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5455 S Hyde Park Blvd  
 City Chicago State IL Zip Code 60615-5805  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 288.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1120P15**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**B. Solzman, Bamboo, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5455 S Hyde Park Blvd  
 City Chicago State IL Zip Code 60615-5805  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 288.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1122S09**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**C. Townsend, Sue, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4997 Stonecastle Dr  
 City Venice State FL Zip Code 34293-8203  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 312.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WM9D4**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	70.00
<b>TOTAL</b> 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 251 OF 295
	<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. Townsend, Sue, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4997 Stonecastle Dr  
 City Venice State FL Zip Code 34293-8203  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 312.00

Date of Receipt  
 02 / 08 / 2021  
**Transaction ID : VR08C10WNR9**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**B. Townsend, Sue, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4997 Stonecastle Dr  
 City Venice State FL Zip Code 34293-8203  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 312.00

Date of Receipt  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y4E85**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**C. Townsend, Sue, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4997 Stonecastle Dr  
 City Venice State FL Zip Code 34293-8203  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 312.00

Date of Receipt  
 02 / 22 / 2021  
**Transaction ID : VR08C111H5T7**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	45.00
<b>TOTAL</b> 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 252 OF 295
	<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. Townsend, Sue, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4997 Stonecastle Dr  
 City Venice State FL Zip Code 34293-8203  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 312.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1121HP6**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**B. Townsend, Sue, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4997 Stonecastle Dr  
 City Venice State FL Zip Code 34293-8203  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 312.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1121HQ3**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**C. Townsend, Sue, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4997 Stonecastle Dr  
 City Venice State FL Zip Code 34293-8203  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 312.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1122J11**  
 Amount of Each Receipt this Period  
 3.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	33.00
<b>TOTAL</b> 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 253 OF 295
	<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. Townsend, Sue, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4997 Stonecastle Dr  
 City Venice State FL Zip Code 34293-8203  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 312.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1122XS2**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**B. Vanaman, Valerie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2011 N Kenmore Ave  
 City Los Angeles State CA Zip Code 90027-1813  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y2VG9**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. Walker, Barbara, Lee, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 21 Via Marina Apt 1  
 City Marina Del Rey State CA Zip Code 90292-7120  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Barbara Walker Interiors Occupation (for Individual) Decorator  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111EYW0**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	365.00
<b>TOTAL</b> 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 254 OF 295
	(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**

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

Mailing Address 21 Via Marina  
Apt 1

City Marina Del Rey	State CA	Zip Code 90292-7120
------------------------	-------------	------------------------

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

Name of Employer (for Individual) Barbara Walker Interiors	Occupation (for Individual) Decorator
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
800.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	22	/	2021

**Transaction ID : VR08C111H239**

Amount of Each Receipt this Period  
25.00

Memo Item

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

Mailing Address 21 Via Marina  
Apt 1

City Marina Del Rey	State CA	Zip Code 90292-7120
------------------------	-------------	------------------------

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

Name of Employer (for Individual) Barbara Walker Interiors	Occupation (for Individual) Decorator
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
800.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2021

**Transaction ID : VR08C111Z817**

Amount of Each Receipt this Period  
25.00

Memo Item

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

Mailing Address 21 Via Marina  
Apt 1

City Marina Del Rey	State CA	Zip Code 90292-7120
------------------------	-------------	------------------------

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

Name of Employer (for Individual) Barbara Walker Interiors	Occupation (for Individual) Decorator
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
800.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2021

**Transaction ID : VR08C111ZA86**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	150.00
<b>TOTAL</b> 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 255 OF 295
	<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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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. Walker, Barbara, Lee, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 21 Via Marina Apt 1  
 City Marina Del Rey State CA Zip Code 90292-7120  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Barbara Walker Interiors Occupation (for Individual) Decorator  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 02 / 28 / 2021  
**Transaction ID : VR08C111ZAA2**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Walker, Barbara, Lee, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 21 Via Marina Apt 1  
 City Marina Del Rey State CA Zip Code 90292-7120  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Barbara Walker Interiors Occupation (for Individual) Decorator  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 02 / 28 / 2021  
**Transaction ID : VR08C111ZAB0**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Walker, Barbara, Lee, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 21 Via Marina Apt 1  
 City Marina Del Rey State CA Zip Code 90292-7120  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Barbara Walker Interiors Occupation (for Individual) Decorator  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 02 / 28 / 2021  
**Transaction ID : VR08C1120B04**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	150.00
<b>TOTAL</b> 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 256 OF 295
	<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. Watkins, Lucien, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1545 54Th Ave S  
 City Saint Petersburg State FL Zip Code 33705-5012  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 02 / 08 / 2021  
**Transaction ID : VR08C10WJDD8**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**B. Watkins, Lucien, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1545 54Th Ave S  
 City Saint Petersburg State FL Zip Code 33705-5012  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 02 / 08 / 2021  
**Transaction ID : VR08C10WM504**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**C. Watkins, Lucien, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1545 54Th Ave S  
 City Saint Petersburg State FL Zip Code 33705-5012  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 02 / 08 / 2021  
**Transaction ID : VR08C10WN1T0**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	25.00
<b>TOTAL</b> 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 257 OF 295
	<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. Watkins, Lucien, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1545 54Th Ave S  
 City Saint Petersburg State FL Zip Code 33705-5012  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 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 / 15 / 2021  
**Transaction ID : VR08C10Y26C5**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**B. Watkins, Lucien, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1545 54Th Ave S  
 City Saint Petersburg State FL Zip Code 33705-5012  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 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 / 15 / 2021  
**Transaction ID : VR08C10Y2760**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

**C. Watkins, Lucien, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1545 54Th Ave S  
 City Saint Petersburg State FL Zip Code 33705-5012  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 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 / 15 / 2021  
**Transaction ID : VR08C10Y2T77**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	40.00
<b>TOTAL</b> 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 258 OF 295
	(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. Watkins, Lucien, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1545 54Th Ave S  
 City Saint Petersburg State FL Zip Code 33705-5012  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 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 / 15 / 2021  
**Transaction ID : VR08C10Y3JG8**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**B. Watkins, Lucien, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1545 54Th Ave S  
 City Saint Petersburg State FL Zip Code 33705-5012  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 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 / 15 / 2021  
**Transaction ID : VR08C10Y45W3**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**C. Watkins, Lucien, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1545 54Th Ave S  
 City Saint Petersburg State FL Zip Code 33705-5012  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 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 / 15 / 2021  
**Transaction ID : VR08C10Y50J1**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	25.00
<b>TOTAL</b> 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 259 OF 295
	<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. Watkins, Lucien, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1545 54Th Ave S  
 City Saint Petersburg State FL Zip Code 33705-5012  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 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 / 28 / 2021  
**Transaction ID : VR08C111ZB89**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**B. Watkins, Lucien, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1545 54Th Ave S  
 City Saint Petersburg State FL Zip Code 33705-5012  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 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 / 28 / 2021  
**Transaction ID : VR08C111ZCX6**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

**C. Watkins, Lucien, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1545 54Th Ave S  
 City Saint Petersburg State FL Zip Code 33705-5012  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 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 / 28 / 2021  
**Transaction ID : VR08C11220D5**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	30.00
<b>TOTAL</b> 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 260 OF 295
	<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. 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 / 15 / 2021  
**Transaction ID : VR08C10Y5CE7**  
 Amount of Each Receipt this Period  
 25.00  
 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  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1120BS0**  
 Amount of Each Receipt this Period  
 100.00  
 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  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1120BT8**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	175.00
<b>TOTAL</b> 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 261 OF 295
	<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. Welles, Paddy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 448  
 City Horseheads State NY Zip Code 14845-0448  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Author  
 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 / 08 / 2021  
**Transaction ID : VR08C10WKZE3**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**B. Welles, Paddy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 448  
 City Horseheads State NY Zip Code 14845-0448  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Author  
 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 / 08 / 2021  
**Transaction ID : VR08C10WM9W3**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**C. Welles, Paddy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 448  
 City Horseheads State NY Zip Code 14845-0448  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Author  
 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 / 08 / 2021  
**Transaction ID : VR08C10WMMM4**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	55.00
<b>TOTAL</b> 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 262 OF 295
	<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. Welles, Paddy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 448  
 City Horseheads State NY Zip Code 14845-0448  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Author  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 205.00

Date of Receipt **02 / 15 / 2021**  
**Transaction ID : VR08C10Y42H0**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**B. Whatley, Marianne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 249 Corry St  
 City Madison State WI Zip Code 53704-5760  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 250.00

Date of Receipt **02 / 08 / 2021**  
**Transaction ID : VR08C10WM8D3**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Whatley, Marianne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 249 Corry St  
 City Madison State WI Zip Code 53704-5760  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 250.00

Date of Receipt **02 / 15 / 2021**  
**Transaction ID : VR08C10Y3P84**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	115.00
<b>TOTAL</b> 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 263 OF 295
	<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. Whatley, Mariamne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 249 Corry St  
 City Madison State WI Zip Code 53704-5760  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1120ZW7**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**B. Whatley, Mariamne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 249 Corry St  
 City Madison State WI Zip Code 53704-5760  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1120ZX4**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**C. Whatley, Mariamne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 249 Corry St  
 City Madison State WI Zip Code 53704-5760  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C11219S5**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	150.00
<b>TOTAL</b> 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 264 OF 295
	(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. White, Sheila, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2876 Baronet Way

City Sacramento	State CA	Zip Code 95833-2909
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
285.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2021

**Transaction ID : VR08C10WM8X8**

Amount of Each Receipt this Period  
15.00

Memo Item

**B. White, Sheila, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2876 Baronet Way

City Sacramento	State CA	Zip Code 95833-2909
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
285.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2021

**Transaction ID : VR08C10WM8Y6**

Amount of Each Receipt this Period  
15.00

Memo Item

**C. White, Sheila, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2876 Baronet Way

City Sacramento	State CA	Zip Code 95833-2909
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
285.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02		15		2021

**Transaction ID : VR08C10Y2964**

Amount of Each Receipt this Period  
20.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	50.00
<b>TOTAL</b> 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 265 OF 295
	(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. White, Sheila, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2876 Baronet Way  
 City Sacramento State CA Zip Code 95833-2909  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y3Q46**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**B. White, Sheila, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2876 Baronet Way  
 City Sacramento State CA Zip Code 95833-2909  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y4DA0**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**C. White, Sheila, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2876 Baronet Way  
 City Sacramento State CA Zip Code 95833-2909  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y5Q33**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	45.00
<b>TOTAL</b> 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 266 OF 295
	<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. White, Sheila, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2876 Baronet Way  
 City Sacramento State CA Zip Code 95833-2909  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y5Q41**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**B. White, Sheila, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2876 Baronet Way  
 City Sacramento State CA Zip Code 95833-2909  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111FHA0**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. White, Sheila, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2876 Baronet Way  
 City Sacramento State CA Zip Code 95833-2909  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111GNA6**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	55.00
<b>TOTAL</b> 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 267 OF 295
	<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. White, Sheila, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2876 Baronet Way  
 City Sacramento State CA Zip Code 95833-2909  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 02 / 28 / 2021  
**Transaction ID : VR08C1121MR8**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**B. Wilkes, Susan, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2600 9Th St Apt A5  
 City Boulder State CO Zip Code 80304-3323  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt 02 / 08 / 2021  
**Transaction ID : VR08C10WJVF3**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**C. Wilkes, Susan, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2600 9Th St Apt A5  
 City Boulder State CO Zip Code 80304-3323  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt 02 / 08 / 2021  
**Transaction ID : VR08C10WMNP1**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	45.00
<b>TOTAL</b> 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 268 OF 295
	<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. Wilkes, Susan, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2600 9Th St  
 Apt A5  
 City Boulder State CO Zip Code 80304-3323  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WMNQ9**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**B. Wilkes, Susan, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2600 9Th St  
 Apt A5  
 City Boulder State CO Zip Code 80304-3323  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WMNR7**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**C. Wilkes, Susan, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2600 9Th St  
 Apt A5  
 City Boulder State CO Zip Code 80304-3323  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WMZW0**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	35.00
<b>TOTAL</b> 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 269 OF 295
	<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. Wilkes, Susan, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2600 9Th St  
 Apt A5  
 City Boulder State CO Zip Code 80304-3323  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WMZX8**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**B. Wilkes, Susan, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2600 9Th St  
 Apt A5  
 City Boulder State CO Zip Code 80304-3323  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y3QD7**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**C. Wilkes, Susan, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2600 9Th St  
 Apt A5  
 City Boulder State CO Zip Code 80304-3323  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y4FC9**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	35.00
<b>TOTAL</b> 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 270 OF 295
	(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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**Congressional Progressive Caucus PAC**

**A. Wilkes, Susan, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2600 9Th St  
 Apt A5  
 City Boulder State CO Zip Code 80304-3323  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y4FD7**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**B. Wilkes, Susan, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2600 9Th St  
 Apt A5  
 City Boulder State CO Zip Code 80304-3323  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y5KR0**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**C. Wilkes, Susan, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2600 9Th St  
 Apt A5  
 City Boulder State CO Zip Code 80304-3323  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111FY73**  
 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 271 OF 295
	<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. Wilkes, Susan, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2600 9Th St  
 Apt A5  
 City Boulder State CO Zip Code 80304-3323  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111HTK5**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**B. Wilkes, Susan, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2600 9Th St  
 Apt A5  
 City Boulder State CO Zip Code 80304-3323  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C111ZJZ4**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**C. Wilkes, Susan, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2600 9Th St  
 Apt A5  
 City Boulder State CO Zip Code 80304-3323  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C11218B1**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	35.00
<b>TOTAL</b> 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 272 OF 295
	<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. Wilkes, Susan, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2600 9Th St  
 Apt A5  
 City Boulder State CO Zip Code 80304-3323  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1121GK1**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**B. Wilkes, Susan, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2600 9Th St  
 Apt A5  
 City Boulder State CO Zip Code 80304-3323  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1121GM7**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**C. Wilkes, Susan, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2600 9Th St  
 Apt A5  
 City Boulder State CO Zip Code 80304-3323  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1121GN5**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	45.00
<b>TOTAL</b> 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 273 OF 295		
	<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. Wilkes, Susan, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2600 9Th St  
 Apt A5  
 City Boulder State CO Zip Code 80304-3323  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1121GP3**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**B. Wilkes, Susan, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2600 9Th St  
 Apt A5  
 City Boulder State CO Zip Code 80304-3323  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2021  
**Transaction ID : VR08C1121GQ1**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**C. Wright, James, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9347 S Eberhart Ave  
 City Chicago State IL Zip Code 60619-7416  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111GKB0**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	330.00
<b>TOTAL</b> 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 274 OF 295
	<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. 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 ▼ 430.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WJE56**  
 Amount of Each Receipt this Period  
 25.00  
 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 ▼ 430.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2021  
**Transaction ID : VR08C10WKYF8**  
 Amount of Each Receipt this Period  
 35.00  
 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 ▼ 430.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y4E19**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	75.00
<b>TOTAL</b> 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 275 OF 295
	<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. 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 ▼ 430.00

Date of Receipt  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y4F04**  
 Amount of Each Receipt this Period 50.00  
 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 ▼ 430.00

Date of Receipt  
 02 / 22 / 2021  
**Transaction ID : VR08C111EYS8**  
 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 ▼ 430.00

Date of Receipt  
 02 / 22 / 2021  
**Transaction ID : VR08C111H085**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	100.00
<b>TOTAL</b> 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 276 OF 295
	(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. 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 ▼ 430.00

Date of Receipt **02 / 22 / 2021**  
**Transaction ID : VR08C111HAQ2**  
 Amount of Each Receipt this Period 35.00  
 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 ▼ 430.00

Date of Receipt **02 / 28 / 2021**  
**Transaction ID : VR08C1121FW9**  
 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 ▼ 430.00

Date of Receipt **02 / 28 / 2021**  
**Transaction ID : VR08C1121M40**  
 Amount of Each Receipt this Period 35.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	95.00
<b>TOTAL</b> 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 277 OF 295
	<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. Zablow, Leonard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 305 W 28Th St  
 Apt 18H  
 City New York State NY Zip Code 10001-7935  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt 02 / 08 / 2021  
**Transaction ID : VR08C10WKSH2**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Zablow, Leonard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 305 W 28Th St  
 Apt 18H  
 City New York State NY Zip Code 10001-7935  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt 02 / 15 / 2021  
**Transaction ID : VR08C10Y2VP6**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Zablow, Leonard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 305 W 28Th St  
 Apt 18H  
 City New York State NY Zip Code 10001-7935  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt 02 / 15 / 2021  
**Transaction ID : VR08C10Y3790**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	55.00
<b>TOTAL</b> 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 278 OF 295
	<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. Zablow, Leonard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 305 W 28Th St  
 Apt 18H  
 City New York State NY Zip Code 10001-7935  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2021  
**Transaction ID : VR08C10Y3834**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**B. Zablow, Leonard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 305 W 28Th St  
 Apt 18H  
 City New York State NY Zip Code 10001-7935  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111GMX3**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**C. Zablow, Leonard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 305 W 28Th St  
 Apt 18H  
 City New York State NY Zip Code 10001-7935  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2021  
**Transaction ID : VR08C111JFG6**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	45.00
<b>TOTAL</b> 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 279 OF 295		
	<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.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**Zablow, Leonard, , ,**

Mailing Address 305 W 28Th St  
Apt 18H

City New York	State NY	Zip Code 10001-7935
------------------	-------------	------------------------

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
265.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 28 / 2021

**Transaction ID : VR08C1121W30**

Amount of Each Receipt this Period  
10.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10.00
<b>TOTAL</b> This Period (last page this line number only).....	30095.36

**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 280 OF 295
<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.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
D.R.I.V.E. - DEMOCRAT, REPUBLICAN, INDEPENDENT VOTER EDUCATION (THE PAC OF THE INTERNATION

Mailing Address 25 Louisiana Ave NW

City Washington	State DC	Zip Code 20001-2130
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00032979

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
02	/	25	/	2021

**Transaction ID : VR08C112DX11**

Amount of Each Receipt this Period  
5000.00

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
-----	---	-----	---	---------

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
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5000.00
<b>TOTAL</b> This Period (last page this line number only).....	5000.00

**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:

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : VQZ94AP3B5**  
Amount of Each Disbursement this Period

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:

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : VQZ94AP4M1**  
Amount of Each Disbursement this Period

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:

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : VQZ94AP69F**  
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**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

MM / DD / YYYY  
02 / 28 / 2021

FEC Identification Number

C  
Transaction ID : VQZ94AP6EY  
Amount of Each Disbursement this Period  
1697.64

Memo Item

Full Name (Last, First, Middle Initial)

**B. 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 / 2021

FEC Identification Number

C  
Transaction ID : VQZ94AP6BF  
Amount of Each Disbursement this Period  
543.98

Memo Item

Full Name (Last, First, Middle Initial)

**C. MaestroConference VoiceVoice**

Mailing Address 1025 3Rd St

City Oakland State CA Zip Code 94607-2507

Purpose of Disbursement  
Telecommunication Services

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
02 / 16 / 2021

FEC Identification Number

C  
Transaction ID : VQZ94AP6BI  
Amount of Each Disbursement this Period  
97.00

Memo Item

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

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

2241.62

**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, , ,**

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  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1			2	0	2	1		

FEC Identification Number

**C** [Redacted]  
**Transaction ID : VQZ94AP675**  
Amount of Each Disbursement this Period  
[Redacted] 2601.05

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  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1			2	0	2	1		

FEC Identification Number

**C** [Redacted]  
**Transaction ID : VQZ94AP676!**  
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  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

FEC Identification Number

**C** [Redacted]  
**Transaction ID : VQZ94AP6M**  
Amount of Each Disbursement this Period  
[Redacted] 2601.06

Memo Item

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

[Redacted] 5238.26

**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. 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		2	5		2	0	2	1

FEC Identification Number

**C** [Redacted]

**Transaction ID : VQZ94AP6M1**

Amount of Each Disbursement this Period

[Redacted] 36.15

Memo Item

Full Name (Last, First, Middle Initial)

**B. DC Health Link**

Mailing Address 645 H St NE

City  
Washington

State  
DC

Zip Code  
20002-4347

Purpose of Disbursement  
Health Insurance

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	2		2	0	2	1

FEC Identification Number

**C** [Redacted]

**Transaction ID : VQZ94AP356**

Amount of Each Disbursement this Period

[Redacted] 510.13

Memo Item

Full Name (Last, First, Middle Initial)

**C. 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

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	4		2	0	2	1

FEC Identification Number

**C** [Redacted]

**Transaction ID : VQZ94AP662**

Amount of Each Disbursement this Period

[Redacted] 3317.65

Memo Item

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

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

[Redacted] 3863.93

[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. Fidelity Investments Institutional Operations Company**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	12	/	2021

Mailing Address PO Box 770002

FEC Identification Number

C
---

**Transaction ID : VQZ94AP672**  
Amount of Each Disbursement this Period

999.99
--------

Memo Item

City Cincinnati

State OH

Zip Code 45277-1102

Purpose of Disbursement  
Employee Retirement Plan

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Fidelity Investments Institutional Operations Company**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	26	/	2021

Mailing Address PO Box 770002

FEC Identification Number

C
---

**Transaction ID : VQZ94AP6MC**  
Amount of Each Disbursement this Period

999.99
--------

Memo Item

City Cincinnati

State OH

Zip Code 45277-1102

Purpose of Disbursement  
Employee Retirement Plan

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Gusto**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	02	/	2021

Mailing Address 525 20Th St

FEC Identification Number

C
---

**Transaction ID : VQZ94AP357**  
Amount of Each Disbursement this Period

60.10
-------

Memo Item

City San Francisco

State CA

Zip Code 94107-4345

Purpose of Disbursement  
Payroll Services

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

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

2060.08
---------

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

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

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

FOR LINE NUMBER: (check only one)

<input 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) <b>A. Gusto</b>		Date of Disbursement MM / DD / YYYY 02 / 11 / 2021
Mailing Address 525 20Th St		FEC Identification Number C [REDACTED] <b>Transaction ID : VQZ94AP671</b> Amount of Each Disbursement this Period [REDACTED] 3113.95
City San Francisco	State CA	
Zip Code 94107-4345		Memo Item <input type="checkbox"/>
Purpose of Disbursement Payroll Taxes	Category/Type [REDACTED]	
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Gusto</b>		Date of Disbursement MM / DD / YYYY 02 / 25 / 2021
Mailing Address 525 20Th St		FEC Identification Number C [REDACTED] <b>Transaction ID : VQZ94AP6MF</b> Amount of Each Disbursement this Period [REDACTED] 3109.18
City San Francisco	State CA	
Zip Code 94107-4345		Memo Item <input type="checkbox"/>
Purpose of Disbursement Payroll Taxes	Category/Type [REDACTED]	
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Kieloch Consulting</b>		Date of Disbursement MM / DD / YYYY 02 / 02 / 2021
Mailing Address 228 2Nd St SE		FEC Identification Number C [REDACTED] <b>Transaction ID : VQZ94AP35F</b> Amount of Each Disbursement this Period [REDACTED] 4000.00
City Washington	State DC	
Zip Code 20003-1943		Memo Item <input type="checkbox"/>
Purpose of Disbursement Fundraising Consulting Services	Category/Type [REDACTED]	
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 10223.13
<b>TOTAL</b> 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. Lake Research Partners, Inc.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	24	/	2021

Mailing Address 1101 17Th St NW  
Ste 301

City Washington State DC Zip Code 20036-4742

Purpose of Disbursement  
Polling

FEC Identification Number

**C** [Redacted]  
**Transaction ID : VQZ94AP6M**  
Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

[Redacted] 53662.50

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

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

**B. Machak, Manjiri, , ,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	11	/	2021

Mailing Address 1450 Church St NW  
Apt C01

City Washington State DC Zip Code 20005-7015

Purpose of Disbursement  
Salary

FEC Identification Number

**C** [Redacted]  
**Transaction ID : VQZ94AP673!**  
Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

[Redacted] 2918.91

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

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

**C. Machak, Manjiri, , ,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	12	/	2021

Mailing Address 1450 Church St NW  
Apt C01

City Washington State DC Zip Code 20005-7015

Purpose of Disbursement  
Cell Phone Reimbursement

FEC Identification Number

**C** [Redacted]  
**Transaction ID : VQZ94AP674**  
Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

[Redacted] 34.63

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

Memo Item

State: District:

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

[Redacted] 56616.04

**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) <b>A. Machak, Manjiri, , ,</b>		Date of Disbursement MM / DD / YYYY 02 / 25 / 2021	
Mailing Address 1450 Church St NW Apt C01		FEC Identification Number C [REDACTED] <b>Transaction ID : VQZ94AP6M</b> Amount of Each Disbursement this Period 2918.90	
City Washington	State DC	Zip Code 20005-7015	Category/ Type
Purpose of Disbursement Salary		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>B. Machak, Manjiri, , ,</b>		Date of Disbursement MM / DD / YYYY 02 / 25 / 2021	
Mailing Address 1450 Church St NW Apt C01		FEC Identification Number C [REDACTED] <b>Transaction ID : VQZ94AP6M</b> Amount of Each Disbursement this Period 34.63	
City Washington	State DC	Zip Code 20005-7015	Category/ Type
Purpose of Disbursement Cell Phone Reimbursement		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>C. Mothership Strategies</b>		Date of Disbursement MM / DD / YYYY 02 / 08 / 2021	
Mailing Address 1328 Florida Ave NW Ste C		FEC Identification Number C [REDACTED] <b>Transaction ID : VQZ94AP67C</b> Amount of Each Disbursement this Period 24848.00	
City Washington	State DC	Zip Code 20009-4827	Category/ Type
Purpose of Disbursement Digital Strategy Consulting Services		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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	27801.53
<b>TOTAL</b> 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. Mothership Strategies**

Mailing Address 1328 Florida Ave NW  
Ste C

City Washington State DC Zip Code 20009-4827

Purpose of Disbursement  
Email Acquisition

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
02 / 26 / 2021

FEC Identification Number

C  
Transaction ID : VQZ94AP6M  
Amount of Each Disbursement this Period  
60000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. NGP VAN**

Mailing Address 1445 New York Ave NW  
Ste 200

City Washington State DC Zip Code 20005-2158

Purpose of Disbursement  
Software and Support

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
02 / 19 / 2021

FEC Identification Number

C  
Transaction ID : VQZ94AP6M  
Amount of Each Disbursement this Period  
6280.50

Memo Item

Full Name (Last, First, Middle Initial)

**C. 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  
State: District: Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 09 / 2021

FEC Identification Number

C  
Transaction ID : VQZ94AP66  
Amount of Each Disbursement this Period  
190.00

Memo Item

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

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

66470.50  
179420.13

**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"/> 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. KAREN CARTER PETERSON FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		19		2021

Mailing Address PO Box 56987

City  
New Orleans

State  
LA

Zip Code  
70156-6987

FEC Identification Number

**C** C00763235

**Transaction ID : VQZ94AP6M**

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement  
Contribution

Category/Type

Candidate Name

**Peterson, Karen, Carter, ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2022  
 Primary  General  
 Other (specify) **Special**

State: LA District: 02

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City

State

Zip Code

FEC Identification Number

**C**

Amount of Each Disbursement this Period

Purpose of Disbursement

Category/Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify)

State: District:

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City

State

Zip Code

FEC Identification Number

**C**

Amount of Each Disbursement this Period

Purpose of Disbursement

Category/Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) **Special**

State: District:

Memo Item

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

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

5000.00

5000.00

**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) <b>A. Cohn, Herbert, , ,</b>		Date of Disbursement MM / DD / YYYY 02 / 28 / 2021	
Mailing Address 241 S 6Th St Apt 1701		FEC Identification Number C [REDACTED] <b>Transaction ID : VQZ94AP6F9</b> Amount of Each Disbursement this Period 50.00	
City Phila	State PA	Zip Code 19106-3733	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>B. Cohn, Herbert, , ,</b>		Date of Disbursement MM / DD / YYYY 02 / 28 / 2021	
Mailing Address 241 S 6Th St Apt 1701		FEC Identification Number C [REDACTED] <b>Transaction ID : VQZ94AP6FA</b> Amount of Each Disbursement this Period 50.00	
City Phila	State PA	Zip Code 19106-3733	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>C. Cohn, Herbert, , ,</b>		Date of Disbursement MM / DD / YYYY 02 / 28 / 2021	
Mailing Address 241 S 6Th St Apt 1701		FEC Identification Number C [REDACTED] <b>Transaction ID : VQZ94AP6Ft</b> Amount of Each Disbursement this Period 50.00	
City Phila	State PA	Zip Code 19106-3733	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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	150.00
<b>TOTAL</b> 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. Cohn, Herbert, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 241 S 6Th St  
Apt 1701

City Phila State PA Zip Code 19106-3733

Purpose of Disbursement Refund

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement 02 / 28 / 2021

FEC Identification Number C

Transaction ID : VQZ94AP6FC

Amount of Each Disbursement this Period 100.00

Memo Item

**B. Copeland, Donald, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 238 Moore Ave

City Buffalo State NY Zip Code 14223-1617

Purpose of Disbursement Refund

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement 02 / 22 / 2021

FEC Identification Number C

Transaction ID : VQZ94AP6DN

Amount of Each Disbursement this Period 250.00

Memo Item

**C. DuVal, Evelyn, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 1800 Clairmont Lk  
Unit 216

City Decatur State GA Zip Code 30033-4037

Purpose of Disbursement Refund

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement 02 / 22 / 2021

FEC Identification Number C

Transaction ID : VQZ94AP6D:

Amount of Each Disbursement this Period 1000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1350.00

**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. Goldman, Lawrence, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 51 Peckslan Rd

City Greenwich State CT Zip Code 06831-3711

Purpose of Disbursement Refund

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 15 / 2021

FEC Identification Number: C

Transaction ID : VQZ94AP4MI

Amount of Each Disbursement this Period: 50.00

Memo Item

**B. Greenfield, Kelly, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 11411 No 114Th Apt 320

City Phoenix State AZ Zip Code 85259

Purpose of Disbursement Refund

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 15 / 2021

FEC Identification Number: C

Transaction ID : VQZ94AP4NV

Amount of Each Disbursement this Period: 300.00

Memo Item

**C. Hacking, Colin, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 850 Webster St Apt 832

City Palo Alto State CA Zip Code 94301-2864

Purpose of Disbursement Refund

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 28 / 2021

FEC Identification Number: C

Transaction ID : VQZ94AP6FI

Amount of Each Disbursement this Period: 25.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 375.00

**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) <b>A. Lurie, Arlene, , ,</b>		Date of Disbursement MM / DD / YYYY 02 / 15 / 2021	
Mailing Address 9607 Isles Cay Dr		FEC Identification Number C [REDACTED] <b>Transaction ID : VQZ94AP4Mf</b> Amount of Each Disbursement this Period 500.00	
City Delray Beach	State FL	Zip Code 33446-9647	Category/ Type
Purpose of Disbursement Refund			
Candidate Name		Memo Item <input type="checkbox"/>	
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>B. Morgenstern, Mary Jo, , ,</b>		Date of Disbursement MM / DD / YYYY 02 / 28 / 2021	
Mailing Address 246 W End Ave		FEC Identification Number C [REDACTED] <b>Transaction ID : VQZ94AP6F7:</b> Amount of Each Disbursement this Period 1000.00	
City New York	State NY	Zip Code 10023-3618	Category/ Type
Purpose of Disbursement Refund			
Candidate Name		Memo Item <input type="checkbox"/>	
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>C. Panepinto, Paul, , ,</b>		Date of Disbursement MM / DD / YYYY 02 / 28 / 2021	
Mailing Address 1 Regency Pl Unit 220		FEC Identification Number C [REDACTED] <b>Transaction ID : VQZ94AP6F6</b> Amount of Each Disbursement this Period 1000.00	
City Woodbridge	State NJ	Zip Code 07095-1027	Category/ Type
Purpose of Disbursement Refund			
Candidate Name		Memo Item <input type="checkbox"/>	
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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2500.00
<b>TOTAL</b> 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) <b>A. Rowberry, Jan, , ,</b>		Date of Disbursement MM / DD / YYYY 02 / 08 / 2021	
Mailing Address 5137 Blackwell Rd		FEC Identification Number C [ ] <b>Transaction ID : VQZ94AP3B7</b> Amount of Each Disbursement this Period [ ] 500.00	
City Memphis	State TN	Zip Code 38134-3101	Category/ Type [ ]
Purpose of Disbursement Refund		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>B. Wright, James, , ,</b>		Date of Disbursement MM / DD / YYYY 02 / 28 / 2021	
Mailing Address 9347 S Eberhart Ave		FEC Identification Number C [ ] <b>Transaction ID : VQZ94AP6FH</b> Amount of Each Disbursement this Period [ ] 300.00	
City Chicago	State IL	Zip Code 60619-7416	Category/ Type [ ]
Purpose of Disbursement Refund		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY [ ] / [ ] / [ ]	
Mailing Address		FEC Identification Number C [ ] Amount of Each Disbursement this Period [ ]	
City	State	Zip Code	Category/ Type [ ]
Purpose of Disbursement		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 800.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ] 5175.00