

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5

ColorOfChange PAC

ADDRESS (number and street) 1714 Franklin St. #100-136 Oakland CA 94612

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C C00428557

3. IS THIS REPORT NEW OR AMENDED

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), Mar 20 (M3), Jun 20 (M6), Sep 20 (M9), Dec 20 (M12), Apr 20 (M4), Jul 20 (M7), Oct 20 (M10), Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S)

Election on MM/DD/YYYY in the State of

- (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

Election on MM/DD/YYYY in the State of

5. Covering Period 01/01/2019 through 01/31/2019

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

Savado, Ismael, , ,

Type or Print Name of Treasurer

Signature of Treasurer Savado, Ismael, , , [Electronically Filed] Date 02/20/2019

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

Table with 10 columns for Office Use Only

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**ColorOfChange 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="2019"/>	<input type="text" value="924467.57"/>	<input type="text" value="924467.57"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="924467.57"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="100720.19"/>	<input type="text" value="100720.19"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="1025187.76"/>	<input type="text" value="1025187.76"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="210075.21"/>	<input type="text" value="210075.21"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="815112.55"/>	<input type="text" value="815112.55"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**  
  
Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
  
Toll Free 800-424-9530  
Local 202-694-1100

## DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**ColorOfChange PAC**

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
01 / 01 / 2019 To: M M / D D / Y Y Y Y Y Y  
01 / 31 / 2019

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	0.00	0.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	100720.19	100720.19
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)).....▶	100720.19	100720.19
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	100720.19	100720.19

**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 .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	210075.21	210075.21
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)) ..	210075.21	210075.21
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	210075.21	210075.21

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

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

**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 6 OF 27
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**ColorOfChange PAC**

**A. ColorOfChange.org**

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

Mailing Address 1714 Franklin St  
# 100-136

City Oakland State CA Zip Code 94612-3488

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 ▼  
65111.88

Date of Receipt  
MM / DD / YYYY  
01 / 03 / 2019

**Transaction ID : VTQZWHMJKM0**

Amount of Each Receipt this Period  
12839.93

Memo Item

Refund of Salary Overpayment, Non-Contribution Account

**B. ColorOfChange.org**

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

Mailing Address 1714 Franklin St  
# 100-136

City Oakland State CA Zip Code 94612-3488

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 ▼  
65111.88

Date of Receipt  
MM / DD / YYYY  
01 / 18 / 2019

**Transaction ID : VTQZWHMJKN8**

Amount of Each Receipt this Period  
52271.95

Memo Item

Refund of Salary Overpayment, Non-Contribution Account

**C. Onward Together**

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

Mailing Address 120 W 45th St

City New York State NY Zip Code 10036-4064

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 ▼  
25000.00

Date of Receipt  
MM / DD / YYYY  
01 / 11 / 2019

**Transaction ID : VTQZWHMJT73**

Amount of Each Receipt this Period  
25000.00

Memo Item

Non-Contribution Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	90111.88
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (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 27
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Soffer, Jill, , ,</b>		Date of Receipt MM / DD / YYYY 01 / 18 / 2019
Mailing Address 561 Spring Park Ranch Rd		Transaction ID : VTQZWHMJZR6
City Carbondale	State CO	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) None	Occupation (for Individual) Not Employed	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B.</b>		Date of Receipt MM / DD / YYYY
Mailing Address		Amount of Each Receipt this Period
City	State	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual)	Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C.</b>		Date of Receipt MM / DD / YYYY
Mailing Address		Amount of Each Receipt this Period
City	State	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual)	Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	250.00
<b>TOTAL</b> This Period (last page this line number only).....	90361.88

**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 type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**ColorOfChange PAC**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>			Date of Disbursement M M / D D / Y Y Y Y Y 01 / 04 / 2019	
Mailing Address PO Box 382110			FEC Identification Number C [REDACTED] <b>Transaction ID : VTQ0M9W7X</b> Amount of Each Disbursement this Period [REDACTED] 112.36 <input type="checkbox"/> Non-Contribution Account <input type="checkbox"/> Memo Item	
City Cambridge	State MA	Zip Code 02238-2110	Category/Type [REDACTED]	
Purpose of Disbursement Credit Card Processing Fees			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. ActBlue Technical Services</b>			Date of Disbursement M M / D D / Y Y Y Y Y 01 / 11 / 2019	
Mailing Address PO Box 382110			FEC Identification Number C [REDACTED] <b>Transaction ID : VTQ0M9W7X</b> Amount of Each Disbursement this Period [REDACTED] 42.32 <input type="checkbox"/> Non-Contribution Account <input type="checkbox"/> Memo Item	
City Cambridge	State MA	Zip Code 02238-2110	Category/Type [REDACTED]	
Purpose of Disbursement Credit Card Processing Fees			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. ActBlue Technical Services</b>			Date of Disbursement M M / D D / Y Y Y Y Y 01 / 11 / 2019	
Mailing Address PO Box 382110			FEC Identification Number C [REDACTED] <b>Transaction ID : VTQ0M9W7X</b> Amount of Each Disbursement this Period [REDACTED] 22.33 <input type="checkbox"/> Non-Contribution Account <input type="checkbox"/> Memo Item	
City Cambridge	State MA	Zip Code 02238-2110	Category/Type [REDACTED]	
Purpose of Disbursement Credit Card Processing Fees			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)..... ▶			[REDACTED] 177.01	
<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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**ColorOfChange PAC**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 01 / 18 / 2019
Mailing Address PO Box 382110		FEC Identification Number C [REDACTED] <b>Transaction ID : VTQ0M9W7X</b>
City Cambridge	State MA	Zip Code 02238-2110
Purpose of Disbursement Credit Card Processing Fees		Amount of Each Disbursement this Period 114.72
Candidate Name		Non-Contribution Account <input type="checkbox"/> Memo Item
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. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 01 / 30 / 2019
Mailing Address PO Box 382110		FEC Identification Number C [REDACTED] <b>Transaction ID : VTQ0M9W7YI</b>
City Cambridge	State MA	Zip Code 02238-2110
Purpose of Disbursement Credit Card Processing Fees		Amount of Each Disbursement this Period 85.83
Candidate Name		Non-Contribution Account <input type="checkbox"/> Memo Item
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. Amuzie, Charles, , ,</b>		Date of Disbursement MM / DD / YYYY 01 / 15 / 2019
Mailing Address 1714 Franklin St		FEC Identification Number C [REDACTED] <b>Transaction ID : VTQ0M9W7V</b>
City Oakland	State CA	Zip Code 94612-3488
Purpose of Disbursement Salary		Amount of Each Disbursement this Period 432.72
Candidate Name		Non-Contribution Account <input type="checkbox"/> Memo Item
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).....▶	633.27
<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 type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**ColorOfChange PAC**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T</b>		Date of Disbursement MM / DD / YYYY 01 / 10 / 2019
Mailing Address 32 Avenue Of The Americas		FEC Identification Number C [REDACTED] <b>Transaction ID : VTQ0M9W7V</b> Amount of Each Disbursement this Period 596.41
City New York	State NY	Zip Code 10013-2473
Purpose of Disbursement Telecommunications Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item Non-Contribution Account	

Full Name (Last, First, Middle Initial) <b>B. Cepeida, Victoria, , ,</b>		Date of Disbursement MM / DD / YYYY 01 / 15 / 2019
Mailing Address 1714 Franklin St # 100-136		FEC Identification Number C [REDACTED] <b>Transaction ID : VTQ0M9W7V</b> Amount of Each Disbursement this Period 1384.56
City Oakland	State CA	Zip Code 94612-3488
Purpose of Disbursement Salary		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item Non-Contribution Account	

Full Name (Last, First, Middle Initial) <b>C. Collins, Jeffrey, , ,</b>		Date of Disbursement MM / DD / YYYY 01 / 15 / 2019
Mailing Address 166 Athol Ave.		FEC Identification Number C [REDACTED] <b>Transaction ID : VTQ0M9W7V</b> Amount of Each Disbursement this Period 203.84
City Washington	State DC	Zip Code 20009
Purpose of Disbursement Salary		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item Non-Contribution Account	

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

2184.81

**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 type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**ColorOfChange PAC**

**A. ColorOfChange.org**

Full Name (Last, First, Middle Initial)

Mailing Address 1714 Franklin St  
# 100-136

City Oakland State CA Zip Code 94612-3488

Purpose of Disbursement Payroll Taxes and Benefits

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 01 / 15 / 2019

FEC Identification Number: C

Transaction ID : VTQ0M9W7X

Amount of Each Disbursement this Period: 2079.86

Memo Item

**B. ColorOfChange.org**

Full Name (Last, First, Middle Initial)

Mailing Address 1714 Franklin St  
# 100-136

City Oakland State CA Zip Code 94612-3488

Purpose of Disbursement Staff Salaries and Benefits

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 01 / 15 / 2019

FEC Identification Number: C

Transaction ID : VTQ0M9W7X

Amount of Each Disbursement this Period: 52271.95

Memo Item

**C. Dean, Sadie, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 1714 Franklin St  
Ste 136

City Oakland State CA Zip Code 94612-3409

Purpose of Disbursement Salary

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 01 / 15 / 2019

FEC Identification Number: C

Transaction ID : VTQ0M9W7V

Amount of Each Disbursement this Period: 692.40

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 55044.21

**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 type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**ColorOfChange PAC**

Full Name (Last, First, Middle Initial) <b>A. Evans &amp; Katz, LLC</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2019
Mailing Address PO Box 75357		FEC Identification Number <b>C</b> Transaction ID : VTQ0M9W7V Amount of Each Disbursement this Period 385.50 Non-Contribution Account <input type="checkbox"/> Memo Item
City Washington	State DC	
Zip Code 20013-0357	Purpose of Disbursement Compliance Services	Category/ Type
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. Evans &amp; Katz, LLC</b>		Date of Disbursement MM / DD / YYYY 01 / 25 / 2019
Mailing Address PO Box 75357		FEC Identification Number <b>C</b> Transaction ID : VTQ0M9W7V Amount of Each Disbursement this Period 3435.00 Non-Contribution Account <input type="checkbox"/> Memo Item
City Washington	State DC	
Zip Code 20013-0357	Purpose of Disbursement Compliance Services	Category/ Type
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. Fenton Communication</b>		Date of Disbursement MM / DD / YYYY 01 / 02 / 2019
Mailing Address 630 9th Ave Ste 910		FEC Identification Number <b>C</b> Transaction ID : VTQ0M9W7V Amount of Each Disbursement this Period 37693.69 Non-Contribution Account <input type="checkbox"/> Memo Item
City New York	State NY	
Zip Code 10036-3745	Purpose of Disbursement Communications Consulting Services	Category/ Type
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).....▶	41514.19
<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 type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**ColorOfChange PAC**

**A. Ghost Note Agency**

Full Name (Last, First, Middle Initial)

Mailing Address 1342 Florida Ave NW

City Washington State DC Zip Code 20009-4808

Purpose of Disbursement Graphic Design Services

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 03 / 2019

FEC Identification Number: C

Transaction ID : VTQ0M9W7V

Amount of Each Disbursement this Period: 12134.00

Memo Item

**B. Harris, Reginald, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 1714 Franklin St

City Oakland State CA Zip Code 94612-3488

Purpose of Disbursement Travel Reimbursement and Stipend

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 04 / 2019

FEC Identification Number: C

Transaction ID : VTQ0M9W7V

Amount of Each Disbursement this Period: 2145.93

Memo Item

**C. American Airlines**

Full Name (Last, First, Middle Initial)

Mailing Address 4333 Amon Carter Blvd

City Fort Worth State TX Zip Code 76155-2664

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 04 / 2019

FEC Identification Number: C

Transaction ID : VTQ0M9W7Y

Amount of Each Disbursement this Period: 910.01

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 14279.93

**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 type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**ColorOfChange PAC**

Full Name (Last, First, Middle Initial) <b>A. Lyft</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2019
Mailing Address 185 Berry St		FEC Identification Number C [REDACTED] <b>Transaction ID : VTQ0M9W7Y</b> Amount of Each Disbursement this Period [REDACTED] 35.83 * Non-Contribution Account
City San Francisco	State CA	Zip Code 94107-5705
Purpose of Disbursement Travel		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Harris, Reginald, , ,</b>		Date of Disbursement MM / DD / YYYY 01 / 15 / 2019
Mailing Address 1714 Franklin St		FEC Identification Number C [REDACTED] <b>Transaction ID : VTQ0M9W7W</b> Amount of Each Disbursement this Period [REDACTED] - 1050.00 Non-Contribution Account
City Oakland	State CA	Zip Code 94612-3488
Purpose of Disbursement Voided Payment from 10/15/2018		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Harris, Reginald, , ,</b>		Date of Disbursement MM / DD / YYYY 01 / 15 / 2019
Mailing Address 1714 Franklin St		FEC Identification Number C [REDACTED] <b>Transaction ID : VTQ0M9W7V</b> Amount of Each Disbursement this Period [REDACTED] 830.64 Non-Contribution Account
City Oakland	State CA	Zip Code 94612-3488
Purpose of Disbursement Salary		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] - 219.36
<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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**ColorOfChange PAC**

Full Name (Last, First, Middle Initial) <b>A. Hinton, Danita, , ,</b>		Date of Disbursement MM / DD / YYYY 01 / 15 / 2019
Mailing Address 1714 Franklin St Ste 136		FEC Identification Number C [REDACTED] <b>Transaction ID : VTQ0M9W7W</b> Amount of Each Disbursement this Period [REDACTED] 302.89 Non-Contribution Account <input type="checkbox"/> Memo Item
City Oakland	State CA	Zip Code 94612-3409
Purpose of Disbursement Salary		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. IB5K LLC</b>		Date of Disbursement MM / DD / YYYY 01 / 22 / 2019
Mailing Address 319 Lafayette St Unit 195		FEC Identification Number C [REDACTED] <b>Transaction ID : VTQ0M9W7W</b> Amount of Each Disbursement this Period [REDACTED] 3750.00 Non-Contribution Account <input type="checkbox"/> Memo Item
City New York	State NY	Zip Code 10012-2711
Purpose of Disbursement Web and Mobile Developing		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Jackson, Contessa, , ,</b>		Date of Disbursement MM / DD / YYYY 01 / 15 / 2019
Mailing Address 1714 Franklin St		FEC Identification Number C [REDACTED] <b>Transaction ID : VTQ0M9W7W</b> Amount of Each Disbursement this Period [REDACTED] 576.96 Non-Contribution Account <input type="checkbox"/> Memo Item
City Oakland	State CA	Zip Code 94612-3488
Purpose of Disbursement Salary		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

[REDACTED] 4629.85

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

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NAME OF COMMITTEE (In Full)  
**ColorOfChange PAC**

Full Name (Last, First, Middle Initial) <b>A. Lathia, Bhavik, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y Y Y 01 / 18 / 2019		
Mailing Address 1714 Franklin St			FEC Identification Number C [REDACTED] <b>Transaction ID : VTQ0M9W7V</b> Amount of Each Disbursement this Period [REDACTED] 300.00 Non-Contribution Account <input type="checkbox"/> Memo Item		
City Oakland	State CA	Zip Code 94612-3488	Category/Type <input type="checkbox"/>		
Purpose of Disbursement Travel Stipend			Amount of Each Disbursement this Period [REDACTED] 300.00 Non-Contribution Account <input type="checkbox"/> Memo Item		
Candidate Name			Category/Type <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) ▼		Amount of Each Disbursement this Period [REDACTED] 300.00 Non-Contribution Account <input type="checkbox"/> Memo Item		
State: District:			Amount of Each Disbursement this Period [REDACTED] 300.00 Non-Contribution Account <input type="checkbox"/> Memo Item		
Full Name (Last, First, Middle Initial) <b>B. Leonard, Ashley, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y Y Y 01 / 04 / 2019		
Mailing Address 4103 Saint Clair Pl			FEC Identification Number C [REDACTED] <b>Transaction ID : VTQ0M9W7V</b> Amount of Each Disbursement this Period [REDACTED] 1200.00 Non-Contribution Account <input type="checkbox"/> Memo Item		
City Temple Hills	State MD	Zip Code 20748-1629	Category/Type <input type="checkbox"/>		
Purpose of Disbursement Administrative Support Services			Amount of Each Disbursement this Period [REDACTED] 1200.00 Non-Contribution Account <input type="checkbox"/> Memo Item		
Candidate Name			Category/Type <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) ▼		Amount of Each Disbursement this Period [REDACTED] 1200.00 Non-Contribution Account <input type="checkbox"/> Memo Item		
State: District:			Amount of Each Disbursement this Period [REDACTED] 1200.00 Non-Contribution Account <input type="checkbox"/> Memo Item		
Full Name (Last, First, Middle Initial) <b>C. Leonard, Ashley, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y Y Y 01 / 10 / 2019		
Mailing Address 4103 Saint Clair Pl			FEC Identification Number C [REDACTED] <b>Transaction ID : VTQ0M9W7V</b> Amount of Each Disbursement this Period [REDACTED] 2125.00 Non-Contribution Account <input type="checkbox"/> Memo Item		
City Temple Hills	State MD	Zip Code 20748-1629	Category/Type <input type="checkbox"/>		
Purpose of Disbursement Administrative Support Services			Amount of Each Disbursement this Period [REDACTED] 2125.00 Non-Contribution Account <input type="checkbox"/> Memo Item		
Candidate Name			Category/Type <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) ▼		Amount of Each Disbursement this Period [REDACTED] 2125.00 Non-Contribution Account <input type="checkbox"/> Memo Item		
State: District:			Amount of Each Disbursement this Period [REDACTED] 2125.00 Non-Contribution Account <input type="checkbox"/> Memo Item		
<b>SUBTOTAL</b> of Disbursements This Page (optional)..... ▶			[REDACTED] 3625.00		
<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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**ColorOfChange PAC**

Full Name (Last, First, Middle Initial) <b>A. Lyft</b>		Date of Disbursement MM / DD / YYYY 01 / 01 / 2019
Mailing Address 185 Berry St		FEC Identification Number C [REDACTED] <b>Transaction ID : VTQ0M9W7X</b> Amount of Each Disbursement this Period [REDACTED] 24.97 * Non-Contribution Account <input checked="" type="checkbox"/> Memo Item
City San Francisco	State CA	Zip Code 94107-5705
Purpose of Disbursement PEX Card - Travel, See Payment from 11/5/18		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Lyft</b>		Date of Disbursement MM / DD / YYYY 01 / 03 / 2019
Mailing Address 185 Berry St		FEC Identification Number C [REDACTED] <b>Transaction ID : VTQ0M9W7X</b> Amount of Each Disbursement this Period [REDACTED] 35.23 * Non-Contribution Account <input checked="" type="checkbox"/> Memo Item
City San Francisco	State CA	Zip Code 94107-5705
Purpose of Disbursement PEX Card - Travel, See Payment from 11/5/18		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Lyft</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2019
Mailing Address 185 Berry St		FEC Identification Number C [REDACTED] <b>Transaction ID : VTQ0M9W7X</b> Amount of Each Disbursement this Period [REDACTED] 25.46 * Non-Contribution Account <input checked="" type="checkbox"/> Memo Item
City San Francisco	State CA	Zip Code 94107-5705
Purpose of Disbursement PEX Card - Travel, See Payment from 11/5/18		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 0.00
<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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**ColorOfChange PAC**

Full Name (Last, First, Middle Initial) <b>A. Lyft</b>			Date of Disbursement MM / DD / YYYY 01 / 07 / 2019		
Mailing Address 185 Berry St			FEC Identification Number C [REDACTED] <b>Transaction ID : VTQ0M9W7X</b> Amount of Each Disbursement this Period [REDACTED] 7.31 * Non-Contribution Account <input checked="" type="checkbox"/> Memo Item		
City San Francisco	State CA	Zip Code 94107-5705	Category/ Type [REDACTED]		
Purpose of Disbursement PEX Card - Travel, See Payment from 11/5/18			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. Lyft</b>			Date of Disbursement MM / DD / YYYY 01 / 09 / 2019		
Mailing Address 185 Berry St			FEC Identification Number C [REDACTED] <b>Transaction ID : VTQ0M9W7X</b> Amount of Each Disbursement this Period [REDACTED] 12.61 * Non-Contribution Account <input checked="" type="checkbox"/> Memo Item		
City San Francisco	State CA	Zip Code 94107-5705	Category/ Type [REDACTED]		
Purpose of Disbursement PEX Card - Travel, See Payment from 11/5/18			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. Lyft</b>			Date of Disbursement MM / DD / YYYY 01 / 09 / 2019		
Mailing Address 185 Berry St			FEC Identification Number C [REDACTED] <b>Transaction ID : VTQ0M9W7X</b> Amount of Each Disbursement this Period [REDACTED] 14.62 * Non-Contribution Account <input checked="" type="checkbox"/> Memo Item		
City San Francisco	State CA	Zip Code 94107-5705	Category/ Type [REDACTED]		
Purpose of Disbursement PEX Card - Travel, See Payment from 11/5/18			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)..... ▶			[REDACTED] 0.00		
<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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**ColorOfChange PAC**

Full Name (Last, First, Middle Initial) <b>A. Malone, Quiana, , ,</b>		Date of Disbursement MM / DD / YYYY 01 / 15 / 2019
Mailing Address 1714 Franklin St # 100-136		FEC Identification Number C [REDACTED] <b>Transaction ID : VTQ0M9W7W</b> Amount of Each Disbursement this Period 692.40 Non-Contribution Account <input type="checkbox"/> Memo Item
City Oakland	State CA	
Zip Code 94612-3488	Purpose of Disbursement Salary	FEC Identification Number C [REDACTED] <b>Transaction ID : VTQ0M9W7W</b> Amount of Each Disbursement this Period 2493.00 * Non-Contribution Account <input checked="" type="checkbox"/> Memo Item
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:	FEC Identification Number C [REDACTED] <b>Transaction ID : VTQ0M9W7W</b> Amount of Each Disbursement this Period 692.16 Non-Contribution Account <input type="checkbox"/> Memo Item
Full Name (Last, First, Middle Initial) <b>B. Mansion on O Street</b>		
Mailing Address 2020 O St NW		Date of Disbursement MM / DD / YYYY 01 / 15 / 2019
City Washington	State DC	FEC Identification Number C [REDACTED] <b>Transaction ID : VTQ0M9W7X!</b> Amount of Each Disbursement this Period 2493.00 * Non-Contribution Account <input checked="" type="checkbox"/> Memo Item
Zip Code 20036-5912	Purpose of Disbursement PEX Card - Venue Rental, See Payment from 11/5/18	
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	FEC Identification Number C [REDACTED] <b>Transaction ID : VTQ0M9W7V</b> Amount of Each Disbursement this Period 692.16 Non-Contribution Account <input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	
Full Name (Last, First, Middle Initial) <b>C. McKinney, Patricia, , ,</b>		Date of Disbursement MM / DD / YYYY 01 / 15 / 2019
Mailing Address 1714 Franklin St		FEC Identification Number C [REDACTED] <b>Transaction ID : VTQ0M9W7V</b> Amount of Each Disbursement this Period 692.16 Non-Contribution Account <input type="checkbox"/> Memo Item
City Oakland	State CA	
Zip Code 94612-3488	Purpose of Disbursement Salary	FEC Identification Number C [REDACTED] <b>Transaction ID : VTQ0M9W7V</b> Amount of Each Disbursement this Period 692.16 Non-Contribution Account <input type="checkbox"/> Memo Item
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).....▶		1384.56
<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 type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**ColorOfChange PAC**

Full Name (Last, First, Middle Initial) <b>A. NGP VAN</b>			Date of Disbursement MM / DD / YYYY 01 / 02 / 2019		
Mailing Address 1101 15th St NW			FEC Identification Number C [REDACTED] <b>Transaction ID : VTQ0M9W7V</b> Amount of Each Disbursement this Period [REDACTED] 625.00 <input type="checkbox"/> Non-Contribution Account <input type="checkbox"/> Memo Item		
City Washington	State DC	Zip Code 20005-5006	Category/Type [REDACTED]		
Purpose of Disbursement Software and Support			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. NGP VAN</b>			Date of Disbursement MM / DD / YYYY 01 / 02 / 2019		
Mailing Address 1101 15th St NW			FEC Identification Number C [REDACTED] <b>Transaction ID : VTQ0M9W7VI</b> Amount of Each Disbursement this Period [REDACTED] 900.00 <input type="checkbox"/> Non-Contribution Account <input type="checkbox"/> Memo Item		
City Washington	State DC	Zip Code 20005-5006	Category/Type [REDACTED]		
Purpose of Disbursement Software and Support			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. Norwood, La'Nae, , ,</b>			Date of Disbursement MM / DD / YYYY 01 / 15 / 2019		
Mailing Address 1714 Franklin St			FEC Identification Number C [REDACTED] <b>Transaction ID : VTQ0M9W7V</b> Amount of Each Disbursement this Period [REDACTED] 692.16 <input type="checkbox"/> Non-Contribution Account <input type="checkbox"/> Memo Item		
City Oakland	State CA	Zip Code 94612-3488	Category/Type [REDACTED]		
Purpose of Disbursement Salary			Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		State: District:		
<b>SUBTOTAL</b> of Disbursements This Page (optional)..... ▶			[REDACTED] 2217.16		
<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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)  
**ColorOfChange PAC**

Full Name (Last, First, Middle Initial) <b>A. Powers, Alicia, , ,</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2019	
Mailing Address 1714 Franklin St		FEC Identification Number C [REDACTED]	
City Oakland	State CA	Zip Code 94612-3488	Transaction ID : VTQ0M9W7V
Purpose of Disbursement Travel Reimbursement and Stipend		Category/ Type	Amount of Each Disbursement this Period 690.86
Candidate Name			<input type="checkbox"/> Non-Contribution Account
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) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) <b>B. American Airlines</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2019	
Mailing Address 4333 Amon Carter Blvd		FEC Identification Number C [REDACTED]	
City Fort Worth	State TX	Zip Code 76155-2664	Transaction ID : VTQ0M9W7Y!
Purpose of Disbursement Travel		Category/ Type	Amount of Each Disbursement this Period 463.59
Candidate Name			* Non-Contribution Account
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)		<input checked="" type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Lyft</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2019	
Mailing Address 185 Berry St		FEC Identification Number C [REDACTED]	
City San Francisco	State CA	Zip Code 94107-5705	Transaction ID : VTQ0M9W7Y
Purpose of Disbursement Travel		Category/ Type	Amount of Each Disbursement this Period 177.27
Candidate Name			* Non-Contribution Account
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) ▼		<input checked="" type="checkbox"/> Memo Item
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	690.86
<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 type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**ColorOfChange PAC**

Full Name (Last, First, Middle Initial)

**A. QuickBase**

Mailing Address 2632 Marine Way

City  
Mountain View

State  
CA

Zip Code  
94043-1126

Purpose of Disbursement  
Software

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : VTQ0M9W7W**  
Amount of Each Disbursement this Period

Non-Contribution Account  
 Memo Item

Full Name (Last, First, Middle Initial)

**B. Ramanujam, Eesha, , ,**

Mailing Address 1714 Franklin St

City  
Oakland

State  
CA

Zip Code  
94612-3488

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : VTQ0M9W7W**  
Amount of Each Disbursement this Period

Non-Contribution Account  
 Memo Item

Full Name (Last, First, Middle Initial)

**C. Ross, Reagan, , ,**

Mailing Address 1714 Franklin St  
Ste 100-136

City  
Oakland

State  
CA

Zip Code  
94612-3488

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : VTQ0M9W7W**  
Amount of Each Disbursement this Period

Non-Contribution Account  
 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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**ColorOfChange PAC**

Full Name (Last, First, Middle Initial) <b>A. Sandler, Reiff, Lamb, Rosenstein &amp; Birkenstock, PC</b>		Date of Disbursement MM / DD / YYYY 01 / 10 / 2019
Mailing Address 1090 Vermont Ave NW Ste 750		FEC Identification Number C [REDACTED] <b>Transaction ID : VTQ0M9W7V</b> Amount of Each Disbursement this Period 2282.50
City Washington	State DC	Zip Code 20005-4970
Purpose of Disbursement Legal Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Sandler, Reiff, Lamb, Rosenstein &amp; Birkenstock, PC</b>		Date of Disbursement MM / DD / YYYY 01 / 25 / 2019
Mailing Address 1090 Vermont Ave NW Ste 750		FEC Identification Number C [REDACTED] <b>Transaction ID : VTQ0M9W7V</b> Amount of Each Disbursement this Period 3272.50
City Washington	State DC	Zip Code 20005-4970
Purpose of Disbursement Legal Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Savadogo, Ismael, , ,</b>		Date of Disbursement MM / DD / YYYY 01 / 15 / 2019
Mailing Address 1714 Franklin St Ste 100-136		FEC Identification Number C [REDACTED] <b>Transaction ID : VTQ0M9W7V</b> Amount of Each Disbursement this Period 580.51
City Oakland	State CA	Zip Code 94612-3488
Purpose of Disbursement Salary		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6135.51
<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 type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**ColorOfChange PAC**

Full Name (Last, First, Middle Initial) <b>A. Scott, Charles, , ,</b>			Date of Disbursement MM / DD / YYYY 01 / 15 / 2019	
Mailing Address 1714 Franklin St				
City Oakland	State CA	Zip Code 94612-3488	FEC Identification Number C [REDACTED] <b>Transaction ID : VTQ0M9W7W</b> Amount of Each Disbursement this Period [REDACTED] 360.54 Non-Contribution Account <input type="checkbox"/> Memo Item	
Purpose of Disbursement Salary		Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President				
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Stanton, Chad, , ,</b>			Date of Disbursement MM / DD / YYYY 01 / 15 / 2019	
Mailing Address 1714 Franklin St # 100-136				
City Oakland	State CA	Zip Code 94612-3488	FEC Identification Number C [REDACTED] <b>Transaction ID : VTQ0M9W7W</b> Amount of Each Disbursement this Period [REDACTED] 307.00 Non-Contribution Account <input type="checkbox"/> Memo Item	
Purpose of Disbursement Salary		Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President				
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Talbert, Shannon, , ,</b>			Date of Disbursement MM / DD / YYYY 01 / 15 / 2019	
Mailing Address 1714 Franklin St				
City Oakland	State CA	Zip Code 94612-3488	FEC Identification Number C [REDACTED] <b>Transaction ID : VTQ0M9W7W</b> Amount of Each Disbursement this Period [REDACTED] 752.64 Non-Contribution Account <input type="checkbox"/> Memo Item	
Purpose of Disbursement Salary		Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President				
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 1420.18
<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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**ColorOfChange PAC**

Full Name (Last, First, Middle Initial)  
**A. Toskr, Inc.**

Mailing Address 1330 Broadway  
FI 3

City Oakland State CA Zip Code 94612-2503

Purpose of Disbursement Non-Federal Digital Communications

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 01 / 04 / 2019

FEC Identification Number: C

Transaction ID : VTQ0M9W7V

Amount of Each Disbursement this Period: 68057.70

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Verizon Wireless**

Mailing Address 1 Verizon Way

City Basking Ridge State NJ Zip Code 07920-1097

Purpose of Disbursement Telecommunications Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 01 / 10 / 2019

FEC Identification Number: C

Transaction ID : VTQ0M9W7V

Amount of Each Disbursement this Period: 316.18

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Wang, Jennifer, , ,**

Mailing Address 1714 Franklin St  
# 100-136

City Oakland State CA Zip Code 94612-3488

Purpose of Disbursement Data Entry Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 01 / 02 / 2019

FEC Identification Number: C

Transaction ID : VTQ0M9W7V

Amount of Each Disbursement this Period: 2484.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 70857.88

**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 type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**ColorOfChange PAC**

Full Name (Last, First, Middle Initial) <b>A. Williams, Bradley, , ,</b>		Date of Disbursement MM / DD / YYYY 01 / 02 / 2019	
Mailing Address 1714 Franklin St		FEC Identification Number C [REDACTED]	
City Oakland	State CA	Zip Code 94612-3488	Transaction ID : VTQ0M9W7V
Purpose of Disbursement Travel Reimbursement and Stipend		Category/ Type	Amount of Each Disbursement this Period 2003.12
Candidate Name			<input type="checkbox"/> Non-Contribution Account
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) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Holiday Inn Downtown</b>		Date of Disbursement MM / DD / YYYY 01 / 02 / 2019	
Mailing Address 330 Loyola Ave		FEC Identification Number C [REDACTED]	
City New Orleans	State LA	Zip Code 70112-1807	Transaction ID : VTQ0M9W7Y
Purpose of Disbursement Lodging		Category/ Type	Amount of Each Disbursement this Period 367.04
Candidate Name			<input type="checkbox"/> * Non-Contribution Account
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) ▼		<input checked="" type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Lyft</b>		Date of Disbursement MM / DD / YYYY 01 / 02 / 2019	
Mailing Address 185 Berry St		FEC Identification Number C [REDACTED]	
City San Francisco	State CA	Zip Code 94107-5705	Transaction ID : VTQ0M9W7Y
Purpose of Disbursement Travel		Category/ Type	Amount of Each Disbursement this Period 228.08
Candidate Name			<input type="checkbox"/> * Non-Contribution Account
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) ▼		<input checked="" type="checkbox"/> Memo Item
State: District:			

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

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

2003.12
[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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**ColorOfChange PAC**

Full Name (Last, First, Middle Initial) <b>A. Williams, James, , ,</b>		Date of Disbursement MM / DD / YYYY 01 / 15 / 2019
Mailing Address 1714 Franklin St		FEC Identification Number <b>C</b> Transaction ID : VTQ0M9W7X Amount of Each Disbursement this Period 363.42 Non-Contribution Account <input type="checkbox"/> Memo Item
City Oakland	State CA	
Purpose of Disbursement Salary	Zip Code 94612-3488	
Candidate Name	Category/Type	
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.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number <b>C</b> Amount of Each Disbursement this Period  <input type="checkbox"/> Memo Item
City	State	
Purpose of Disbursement	Zip Code	
Candidate Name	Category/Type	
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.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number <b>C</b> Amount of Each Disbursement this Period  <input type="checkbox"/> Memo Item
City	State	
Purpose of Disbursement	Zip Code	
Candidate Name	Category/Type	
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).....▶	363.42
<b>TOTAL</b> This Period (last page this line number only).....▶	209438.08