

# 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

PROGRESSIVE KICK INDEPENDENT EXPENDITURES

ADDRESS (number and street) 1904 FRANKLIN STREET  
SUITE 725  
OAKLAND CA 94612

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00492595

3. IS THIS REPORT NEW (N) OR AMENDED (A)  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)
  - Mar 20 (M3)
  - Apr 20 (M4)
  - May 20 (M5)
  - Jun 20 (M6)
  - Jul 20 (M7)
  - Aug 20 (M8)
  - Sep 20 (M9)
  - Oct 20 (M10)
  - Nov 20 (M11) (Non-Election Year Only)
  - Dec 20 (M12) (Non-Election Year Only)
  - 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] / [2017] through [06] / [30] / [2017]

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

Signature of Treasurer GROSSMAN, JOSHUA, , , [Electronically Filed] Date [01] / [16] / [2018]

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)

Page 2

Write or Type Committee Name

**PROGRESSIVE KICK INDEPENDENT EXPENDITURES**

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="2017"/>		288314.29
(b) Cash on Hand at Beginning of Reporting Period.....	288314.29	
(c) Total Receipts (from Line 19) .....	71835.43	71835.43
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	360149.72	360149.72
7. Total Disbursements (from Line 31).....	85731.48	85731.48
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	274418.24	274418.24
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	2000.00	
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

PROGRESSIVE KICK INDEPENDENT EXPENDITURES

Report Covering the Period: From: 01 / 01 / 2017 To: 06 / 30 / 2017

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).....	55000.00	55000.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	55000.00	55000.00
(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) .....	55000.00	55000.00
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).....	16787.84	16787.84
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	47.59	47.59
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)).....▶	71835.43	71835.43
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	71835.43	71835.43

**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 .....	83731.48	83731.48
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	83731.48	83731.48
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).....	2000.00	2000.00
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)) ..	85731.48	85731.48
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	85731.48	85731.48

**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) .....	55000.00	55000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	55000.00	55000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	83731.48	83731.48
37. Offsets to Operating Expenditures (from Line 15, page 3).....	16787.84	16787.84
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	66943.64	66943.64

**SCHEDULE A (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 44
<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)  
**PROGRESSIVE KICK INDEPENDENT EXPENDITURES**

**A. Hess, Lawrence, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6309 Cypress Point Rd.  
 City San Diego State CA Zip Code 92120  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Investor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt **04 / 24 / 2017**  
**Transaction ID : SA11AI.7630**  
 Amount of Each Receipt this Period 25000.00  
 Memo Item

**B. Roswell, Margorie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3443 Guilford Ter  
 City Baltimore State MD Zip Code 21218  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Roswell Infographics Occupation (for Individual) Web Developer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 30000.00

Date of Receipt **01 / 11 / 2017**  
**Transaction ID : SA11AI.7560**  
 Amount of Each Receipt this Period 30000.00  
 Memo Item

**C.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼

Date of Receipt  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	55000.00
<b>TOTAL</b> This Period (last page this line number only).....	55000.00

**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 7 OF 44
<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 checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PROGRESSIVE KICK INDEPENDENT EXPENDITURES**

**A. AmCheck**

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

Mailing Address 110 West A Street

City San Diego	State CA	Zip Code 92101
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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 ▼  
7736.80

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	06	/	2017

**Transaction ID : SA15.7656**

Amount of Each Receipt this Period  
7736.80

Memo Item

**B. GROSSMAN, JOSHUA, , ,**

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

Mailing Address 1904 FRANKLIN STREET  
SUITE 725

City OAKLAND	State CA	Zip Code 94612
-----------------	-------------	-------------------

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 ▼  
8460.04

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	03	/	2017

**Transaction ID : SA15.7635**

Amount of Each Receipt this Period  
8460.04

Memo Item

**C. LCB Associates**

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

Mailing Address 388 17th St.  
Suite 200

City Oakland	State CA	Zip Code 94612
-----------------	-------------	-------------------

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 ▼  
447.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	12	/	2017

**Transaction ID : SA15.7636**

Amount of Each Receipt this Period  
447.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	16643.84
<b>TOTAL</b> This Period (last page this line number only).....	16643.84

**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)  
**PROGRESSIVE KICK INDEPENDENT EXPENDITURES**

Full Name (Last, First, Middle Initial) <b>A. AmCheck</b>		Date of Disbursement MM / DD / YYYY 01 / 15 / 2017
Mailing Address 110 West A Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.7557</b> Amount of Each Disbursement this Period [ ] 709.16
City San Diego	State CA	Zip Code 92101
Purpose of Disbursement Payroll Taxes		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. AmCheck</b>		Date of Disbursement MM / DD / YYYY 01 / 30 / 2017
Mailing Address 110 West A Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.7559</b> Amount of Each Disbursement this Period [ ] 1208.69
City San Diego	State CA	Zip Code 92101
Purpose of Disbursement Payroll Taxes		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. AmCheck</b>		Date of Disbursement MM / DD / YYYY 01 / 31 / 2017
Mailing Address 110 West A Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.7567</b> Amount of Each Disbursement this Period [ ] 33.38
City San Diego	State CA	Zip Code 92101
Purpose of Disbursement Payroll 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	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 1951.23
<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)  
**PROGRESSIVE KICK INDEPENDENT EXPENDITURES**

Full Name (Last, First, Middle Initial) <b>A. AmCheck</b>		Date of Disbursement MM / DD / YYYY 01 / 31 / 2017
Mailing Address 110 West A Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.7568</b> Amount of Each Disbursement this Period [ ] 797.27
City San Diego	State CA	Zip Code 92101
Purpose of Disbursement Payroll Taxes		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. AmCheck</b>		Date of Disbursement MM / DD / YYYY 02 / 15 / 2017
Mailing Address 110 West A Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.7578</b> Amount of Each Disbursement this Period [ ] 33.38
City San Diego	State CA	Zip Code 92101
Purpose of Disbursement Payroll 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. AmCheck</b>		Date of Disbursement MM / DD / YYYY 02 / 15 / 2017
Mailing Address 110 West A Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.7579</b> Amount of Each Disbursement this Period [ ] 824.40
City San Diego	State CA	Zip Code 92101
Purpose of Disbursement Payroll Taxes		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).....▶	[ ] 1655.05
<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)  
**PROGRESSIVE KICK INDEPENDENT EXPENDITURES**

Full Name (Last, First, Middle Initial) <b>A. AmCheck</b>		Date of Disbursement MM / DD / YYYY 02 / 28 / 2017
Mailing Address 110 West A Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.7590</b> Amount of Each Disbursement this Period [ ] 33.38
City San Diego	State CA	
Zip Code 92101	Purpose of Disbursement Payroll Services	Memo Item <input type="checkbox"/>
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. AmCheck</b>		Date of Disbursement MM / DD / YYYY 02 / 28 / 2017
Mailing Address 110 West A Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.7591</b> Amount of Each Disbursement this Period [ ] 733.43
City San Diego	State CA	
Zip Code 92101	Purpose of Disbursement Payroll Taxes	Memo Item <input type="checkbox"/>
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. AmCheck</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2017
Mailing Address 110 West A Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.7595</b> Amount of Each Disbursement this Period [ ] 33.38
City San Diego	State CA	
Zip Code 92101	Purpose of Disbursement Payroll Services	Memo Item <input type="checkbox"/>
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).....▶	[ ] 800.19
<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 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)  
**PROGRESSIVE KICK INDEPENDENT EXPENDITURES**

Full Name (Last, First, Middle Initial) <b>A. AmCheck</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2017
Mailing Address 110 West A Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.7596</b> Amount of Each Disbursement this Period [ ] 10403.86
City San Diego	State CA	Zip Code 92101
Purpose of Disbursement Payroll Taxes	Category/ Type [ ]	
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. AmCheck</b>		Date of Disbursement MM / DD / YYYY 03 / 31 / 2017
Mailing Address 110 West A Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.7607</b> Amount of Each Disbursement this Period [ ] 33.38
City San Diego	State CA	Zip Code 92101
Purpose of Disbursement Payroll Services	Category/ Type [ ]	
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. AmCheck</b>		Date of Disbursement MM / DD / YYYY 03 / 31 / 2017
Mailing Address 110 West A Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.7608</b> Amount of Each Disbursement this Period [ ] 1029.44
City San Diego	State CA	Zip Code 92101
Purpose of Disbursement Payroll Taxes	Category/ Type [ ]	
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).....▶	[ ] 11466.68
<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)  
**PROGRESSIVE KICK INDEPENDENT EXPENDITURES**

Full Name (Last, First, Middle Initial) <b>A. AmCheck</b>			Date of Disbursement M M / D D / Y Y Y Y Y Y 04 / 15 / 2017		
Mailing Address 110 West A Street			FEC Identification Number C [ ] <b>Transaction ID : SB21B.7617</b> Amount of Each Disbursement this Period [ ] 33.38		
City San Diego	State CA	Zip Code 92101	Category/Type [ ]		
Purpose of Disbursement Payroll Services		Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State: District:					
Full Name (Last, First, Middle Initial) <b>B. AmCheck</b>			Date of Disbursement M M / D D / Y Y Y Y Y Y 04 / 15 / 2017		
Mailing Address 110 West A Street			FEC Identification Number C [ ] <b>Transaction ID : SB21B.7618</b> Amount of Each Disbursement this Period [ ] 1423.27		
City San Diego	State CA	Zip Code 92101	Category/Type [ ]		
Purpose of Disbursement Payroll Taxes		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) ▼		<input type="checkbox"/> Memo Item		
State: District:					
Full Name (Last, First, Middle Initial) <b>C. AmCheck</b>			Date of Disbursement M M / D D / Y Y Y Y Y Y 04 / 30 / 2017		
Mailing Address 110 West A Street			FEC Identification Number C [ ] <b>Transaction ID : SB21B.7627</b> Amount of Each Disbursement this Period [ ] 33.38		
City San Diego	State CA	Zip Code 92101	Category/Type [ ]		
Purpose of Disbursement Payroll Services		Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State: District:					
<b>SUBTOTAL</b> of Disbursements This Page (optional)..... ▶			[ ] 1490.03		
<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)  
**PROGRESSIVE KICK INDEPENDENT EXPENDITURES**

Full Name (Last, First, Middle Initial) <b>A. AmCheck</b>		Date of Disbursement MM / DD / YYYY 04 / 30 / 2017	
Mailing Address 110 West A Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.7628</b> Amount of Each Disbursement this Period [ ] 654.12	
City San Diego	State CA	Zip Code 92101	Category/ Type [ ]
Purpose of Disbursement Payroll Taxes		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. AmCheck</b>		Date of Disbursement MM / DD / YYYY 05 / 15 / 2017	
Mailing Address 110 West A Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.7639</b> Amount of Each Disbursement this Period [ ] 33.38	
City San Diego	State CA	Zip Code 92101	Category/ Type [ ]
Purpose of Disbursement Payroll Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. AmCheck</b>		Date of Disbursement MM / DD / YYYY 05 / 15 / 2017	
Mailing Address 110 West A Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.7640</b> Amount of Each Disbursement this Period [ ] 629.27	
City San Diego	State CA	Zip Code 92101	Category/ Type [ ]
Purpose of Disbursement Payroll Taxes		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).....▶	[ ] 1316.77
<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)  
**PROGRESSIVE KICK INDEPENDENT EXPENDITURES**

**A. AmCheck**

Full Name (Last, First, Middle Initial)

Mailing Address 110 West A Street

City San Diego State CA Zip Code 92101

Purpose of Disbursement Payroll Taxes

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 18 / 2017

FEC Identification Number: C

Transaction ID : SB21B.7642

Amount of Each Disbursement this Period: 1575.49

Memo Item

**B. AmCheck**

Full Name (Last, First, Middle Initial)

Mailing Address 110 West A Street

City San Diego State CA Zip Code 92101

Purpose of Disbursement Payroll Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 31 / 2017

FEC Identification Number: C

Transaction ID : SB21B.7651

Amount of Each Disbursement this Period: 33.38

Memo Item

**C. AmCheck**

Full Name (Last, First, Middle Initial)

Mailing Address 110 West A Street

City San Diego State CA Zip Code 92101

Purpose of Disbursement Payroll Taxes

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 31 / 2017

FEC Identification Number: C

Transaction ID : SB21B.7652

Amount of Each Disbursement this Period: 725.22

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2334.09

**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)  
**PROGRESSIVE KICK INDEPENDENT EXPENDITURES**

**A. AmCheck**

Full Name (Last, First, Middle Initial)

Mailing Address 110 West A Street

City San Diego State CA Zip Code 92101

Purpose of Disbursement Payroll Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 15 / 2017

FEC Identification Number: C

Transaction ID : **SB21B.7663**

Amount of Each Disbursement this Period: 33.38

Memo Item

**B. AmCheck**

Full Name (Last, First, Middle Initial)

Mailing Address 110 West A Street

City San Diego State CA Zip Code 92101

Purpose of Disbursement Payroll Taxes

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 15 / 2017

FEC Identification Number: C

Transaction ID : **SB21B.7664**

Amount of Each Disbursement this Period: 742.20

Memo Item

**C. AmCheck**

Full Name (Last, First, Middle Initial)

Mailing Address 110 West A Street

City San Diego State CA Zip Code 92101

Purpose of Disbursement Payroll Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 30 / 2017

FEC Identification Number: C

Transaction ID : **SB21B.7672**

Amount of Each Disbursement this Period: 33.38

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 808.96

**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)  
**PROGRESSIVE KICK INDEPENDENT EXPENDITURES**

**A. AmCheck**

Full Name (Last, First, Middle Initial)

Mailing Address 110 West A Street

City San Diego State CA Zip Code 92101

Purpose of Disbursement Payroll Taxes

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 30 / 2017

FEC Identification Number: C

Transaction ID : SB21B.7673

Amount of Each Disbursement this Period: 733.51

Memo Item

**B. AT&T**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 5025

City Carol Stream State IL Zip Code 60197

Purpose of Disbursement Phones

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 28 / 2017

FEC Identification Number: C

Transaction ID : SB21B.7584

Amount of Each Disbursement this Period: 25.00

Memo Item

**C. AT&T**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 5025

City Carol Stream State IL Zip Code 60197

Purpose of Disbursement Phones

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 28 / 2017

FEC Identification Number: C

Transaction ID : SB21B.7585

Amount of Each Disbursement this Period: 163.60

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 922.11

**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)  
**PROGRESSIVE KICK INDEPENDENT EXPENDITURES**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T</b>		Date of Disbursement MM / DD / YYYY 03 / 31 / 2017
Mailing Address PO Box 5025		FEC Identification Number C <b>Transaction ID : SB21B.7601</b> Amount of Each Disbursement this Period 25.00
City Carol Stream	State IL	
Zip Code 60197	Purpose of Disbursement Phones	Memo Item <input type="checkbox"/>
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. AT&amp;T</b>		Date of Disbursement MM / DD / YYYY 03 / 31 / 2017
Mailing Address PO Box 5025		FEC Identification Number C <b>Transaction ID : SB21B.7602</b> Amount of Each Disbursement this Period 163.60
City Carol Stream	State IL	
Zip Code 60197	Purpose of Disbursement Phones	Memo Item <input type="checkbox"/>
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. AT&amp;T</b>		Date of Disbursement MM / DD / YYYY 04 / 28 / 2017
Mailing Address PO Box 5025		FEC Identification Number C <b>Transaction ID : SB21B.7621</b> Amount of Each Disbursement this Period 155.05
City Carol Stream	State IL	
Zip Code 60197	Purpose of Disbursement Phones	Memo Item <input type="checkbox"/>
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:		

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

343.65

**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)  
**PROGRESSIVE KICK INDEPENDENT EXPENDITURES**

**A. AT&T**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 5025

City Carol Stream State IL Zip Code 60197

Purpose of Disbursement Phones

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
04 / 28 / 2017

FEC Identification Number: C

Transaction ID : SB21B.7622

Amount of Each Disbursement this Period: 25.00

Memo Item

**B. AT&T**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 5025

City Carol Stream State IL Zip Code 60197

Purpose of Disbursement Phones

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
05 / 31 / 2017

FEC Identification Number: C

Transaction ID : SB21B.7645

Amount of Each Disbursement this Period: 25.00

Memo Item

**C. AT&T**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 5025

City Carol Stream State IL Zip Code 60197

Purpose of Disbursement Phones

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
05 / 31 / 2017

FEC Identification Number: C

Transaction ID : SB21B.7646

Amount of Each Disbursement this Period: 155.05

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 205.05

**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)  
**PROGRESSIVE KICK INDEPENDENT EXPENDITURES**

**A. AT&T**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 5025

City Carol Stream State IL Zip Code 60197

Purpose of Disbursement Phones

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
06 / 30 / 2017

FEC Identification Number: C

Transaction ID : SB21B.7677

Amount of Each Disbursement this Period: 25.00

Memo Item

**B. AT&T**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 5025

City Carol Stream State IL Zip Code 60197

Purpose of Disbursement Phones

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
06 / 30 / 2017

FEC Identification Number: C

Transaction ID : SB21B.7678

Amount of Each Disbursement this Period: 155.05

Memo Item

**C. Barcellos, Ben, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 2191 Zinfandel Drive

City Santa Rosa State CA Zip Code 95403

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
01 / 31 / 2017

FEC Identification Number: C

Transaction ID : SB21B.7572

Amount of Each Disbursement this Period: 655.00

Memo Item

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

835.05

**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)  
**PROGRESSIVE KICK INDEPENDENT EXPENDITURES**

Full Name (Last, First, Middle Initial) <b>A. Barcellos, Ben, , ,</b>			Date of Disbursement MM / DD / YYYY 02 / 28 / 2017	
Mailing Address 2191 Zinfandel Drive			FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.7586</b> Amount of Each Disbursement this Period [REDACTED] 3490.00	
City Santa Rosa	State CA	Zip Code 95403	Category/Type [REDACTED]	
Purpose of Disbursement Strategic Consulting		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. Barcellos, Ben, , ,</b>			Date of Disbursement MM / DD / YYYY 02 / 28 / 2017	
Mailing Address 2191 Zinfandel Drive			FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.7587</b> Amount of Each Disbursement this Period [REDACTED] 2170.00	
City Santa Rosa	State CA	Zip Code 95403	Category/Type [REDACTED]	
Purpose of Disbursement Strategic Consulting		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. Barcellos, Ben, , ,</b>			Date of Disbursement MM / DD / YYYY 03 / 31 / 2017	
Mailing Address 2191 Zinfandel Drive			FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.7603</b> Amount of Each Disbursement this Period [REDACTED] 3030.00	
City Santa Rosa	State CA	Zip Code 95403	Category/Type [REDACTED]	
Purpose of Disbursement Strategic Consulting		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] 8690.00
<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 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)  
**PROGRESSIVE KICK INDEPENDENT EXPENDITURES**

Full Name (Last, First, Middle Initial) <b>A. Barcellos, Ben, , ,</b>		Date of Disbursement MM / DD / YYYY 03 / 31 / 2017	
Mailing Address 2191 Zinfandel Drive		FEC Identification Number C [ ] <b>Transaction ID : SB21B.7604</b> Amount of Each Disbursement this Period [ ] 1690.00	
City Santa Rosa	State CA	Zip Code 95403	Category/ Type [ ]
Purpose of Disbursement Strategic Consulting		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Barcellos, Ben, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 17 / 2017	
Mailing Address 2191 Zinfandel Drive		FEC Identification Number C [ ] <b>Transaction ID : SB21B.7619</b> Amount of Each Disbursement this Period [ ] 2035.00	
City Santa Rosa	State CA	Zip Code 95403	Category/ Type [ ]
Purpose of Disbursement Strategic Consulting		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Barcellos, Ben, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 30 / 2017	
Mailing Address 2191 Zinfandel Drive		FEC Identification Number C [ ] <b>Transaction ID : SB21B.7632</b> Amount of Each Disbursement this Period [ ] 1040.00	
City Santa Rosa	State CA	Zip Code 95403	Category/ Type [ ]
Purpose of Disbursement Strategic Consulting		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 4765.00
<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 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)  
**PROGRESSIVE KICK INDEPENDENT EXPENDITURES**

Full Name (Last, First, Middle Initial) <b>A. Barcellos, Ben, , ,</b>		Date of Disbursement MM / DD / YYYY 06 / 13 / 2017
Mailing Address 2191 Zinfandel Drive		FEC Identification Number C [ ] <b>Transaction ID : SB21B.7660</b> Amount of Each Disbursement this Period [ ] 60.00
City Santa Rosa	State CA	Zip Code 95403
Purpose of Disbursement Strategic Consulting		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. Barcellos, Ben, , ,</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2017
Mailing Address 2191 Zinfandel Drive		FEC Identification Number C [ ] <b>Transaction ID : SB21B.7679</b> Amount of Each Disbursement this Period [ ] 515.00
City Santa Rosa	State CA	Zip Code 95403
Purpose of Disbursement Strategic Consulting		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. Barcellos, Ben, , ,</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2017
Mailing Address 2191 Zinfandel Drive		FEC Identification Number C [ ] <b>Transaction ID : SB21B.7680</b> Amount of Each Disbursement this Period [ ] 265.00
City Santa Rosa	State CA	Zip Code 95403
Purpose of Disbursement Strategic Consulting		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).....▶	[ ] 840.00
<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 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)  
**PROGRESSIVE KICK INDEPENDENT EXPENDITURES**

Full Name (Last, First, Middle Initial)

**A. Catalyst**

Mailing Address 1090 Vermont Ave NW

City Washington State DC Zip Code 20005

Purpose of Disbursement Targeting Data

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 01 / 2017

FEC Identification Number

C  
Transaction ID : SB21B.7573  
Amount of Each Disbursement this Period  
500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. GROSSMAN, JOSHUA, , ,**

Mailing Address 1904 FRANKLIN STREET SUITE 725

City OAKLAND State CA Zip Code 94612

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 15 / 2017

FEC Identification Number

C  
Transaction ID : SB21B.7554  
Amount of Each Disbursement this Period  
1356.37

Memo Item

Full Name (Last, First, Middle Initial)

**C. GROSSMAN, JOSHUA, , ,**

Mailing Address 1904 FRANKLIN STREET SUITE 725

City OAKLAND State CA Zip Code 94612

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 31 / 2017

FEC Identification Number

C  
Transaction ID : SB21B.7565  
Amount of Each Disbursement this Period  
1356.39

Memo Item

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

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

3212.76

**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)  
**PROGRESSIVE KICK INDEPENDENT EXPENDITURES**

Full Name (Last, First, Middle Initial) <b>A. GROSSMAN, JOSHUA, , ,</b>		Date of Disbursement MM / DD / YYYY 02 / 15 / 2017
Mailing Address 1904 FRANKLIN STREET SUITE 725		FEC Identification Number C [ ] <b>Transaction ID : SB21B.7576</b> Amount of Each Disbursement this Period [ ] 1356.37
City OAKLAND	State CA	Zip Code 94612
Purpose of Disbursement Payroll		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. GROSSMAN, JOSHUA, , ,</b>		Date of Disbursement MM / DD / YYYY 02 / 28 / 2017
Mailing Address 1904 FRANKLIN STREET SUITE 725		FEC Identification Number C [ ] <b>Transaction ID : SB21B.7588</b> Amount of Each Disbursement this Period [ ] 1356.39
City OAKLAND	State CA	Zip Code 94612
Purpose of Disbursement Payroll		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. GROSSMAN, JOSHUA, , ,</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2017
Mailing Address 1904 FRANKLIN STREET SUITE 725		FEC Identification Number C [ ] <b>Transaction ID : SB21B.7593</b> Amount of Each Disbursement this Period [ ] 9816.42
City OAKLAND	State CA	Zip Code 94612
Purpose of Disbursement Payroll		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	

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

[ ] 12529.18

**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)  
**PROGRESSIVE KICK INDEPENDENT EXPENDITURES**

Full Name (Last, First, Middle Initial) <b>A. GROSSMAN, JOSHUA, , ,</b>		Date of Disbursement MM / DD / YYYY 03 / 31 / 2017
Mailing Address 1904 FRANKLIN STREET SUITE 725		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.7605</b> Amount of Each Disbursement this Period [REDACTED] 1356.38
City OAKLAND	State CA	Zip Code 94612
Purpose of Disbursement Payroll	Category/ Type [REDACTED]	
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. GROSSMAN, JOSHUA, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 15 / 2017
Mailing Address 1904 FRANKLIN STREET SUITE 725		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.7615</b> Amount of Each Disbursement this Period [REDACTED] 1356.37
City OAKLAND	State CA	Zip Code 94612
Purpose of Disbursement Payroll	Category/ Type [REDACTED]	
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. GROSSMAN, JOSHUA, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 30 / 2017
Mailing Address 1904 FRANKLIN STREET SUITE 725		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.7625</b> Amount of Each Disbursement this Period [REDACTED] 1356.39
City OAKLAND	State CA	Zip Code 94612
Purpose of Disbursement Payroll	Category/ Type [REDACTED]	
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:		

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

[REDACTED] 4069.14

**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)  
**PROGRESSIVE KICK INDEPENDENT EXPENDITURES**

Full Name (Last, First, Middle Initial) <b>A. GROSSMAN, JOSHUA, , ,</b>		Date of Disbursement MM / DD / YYYY 05 / 15 / 2017
Mailing Address 1904 FRANKLIN STREET SUITE 725		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.7637</b> Amount of Each Disbursement this Period [REDACTED] 1356.37
City OAKLAND	State CA	Zip Code 94612
Purpose of Disbursement Payroll		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>B. GROSSMAN, JOSHUA, , ,</b>		Date of Disbursement MM / DD / YYYY 05 / 31 / 2017
Mailing Address 1904 FRANKLIN STREET SUITE 725		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.7649</b> Amount of Each Disbursement this Period [REDACTED] 1356.39
City OAKLAND	State CA	Zip Code 94612
Purpose of Disbursement Payroll		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. GROSSMAN, JOSHUA, , ,</b>		Date of Disbursement MM / DD / YYYY 06 / 15 / 2017
Mailing Address 1904 FRANKLIN STREET SUITE 725		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.7661</b> Amount of Each Disbursement this Period [REDACTED] 1356.38
City OAKLAND	State CA	Zip Code 94612
Purpose of Disbursement Payroll		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

4069.14

**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)  
**PROGRESSIVE KICK INDEPENDENT EXPENDITURES**

**A. GROSSMAN, JOSHUA, , ,**

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM / DD / YYYY  
06 / 30 / 2017

Mailing Address: 1904 FRANKLIN STREET  
SUITE 725

City: OAKLAND State: CA Zip Code: 94612

Purpose of Disbursement: Payroll

Candidate Name:

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

FEC Identification Number: C  
Transaction ID : SB21B.7670  
Amount of Each Disbursement this Period: 1356.38

Memo Item

**B. LCB Associates**

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM / DD / YYYY  
01 / 06 / 2017

Mailing Address: 388 17th St.  
Suite 200

City: Oakland State: CA Zip Code: 94612

Purpose of Disbursement: Rent

Candidate Name:

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

FEC Identification Number: C  
Transaction ID : SB21B.7552  
Amount of Each Disbursement this Period: 447.00

Memo Item

**C. LCB Associates**

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM / DD / YYYY  
02 / 01 / 2017

Mailing Address: 388 17th St.  
Suite 200

City: Oakland State: CA Zip Code: 94612

Purpose of Disbursement: Rent

Candidate Name:

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

FEC Identification Number: C  
Transaction ID : SB21B.7574  
Amount of Each Disbursement this Period: 447.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2250.38

**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)  
**PROGRESSIVE KICK INDEPENDENT EXPENDITURES**

Full Name (Last, First, Middle Initial) <b>A. LCB Associates</b>		Date of Disbursement MM / DD / YYYY 03 / 01 / 2017
Mailing Address 388 17th St. Suite 200		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.7592</b> Amount of Each Disbursement this Period [REDACTED] 447.00
City Oakland	State CA	Zip Code 94612
Purpose of Disbursement Rent		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>B. LCB Associates</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2017
Mailing Address 388 17th St. Suite 200		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.7609</b> Amount of Each Disbursement this Period [REDACTED] 447.00
City Oakland	State CA	Zip Code 94612
Purpose of Disbursement Rent		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. LCB Associates</b>		Date of Disbursement MM / DD / YYYY 05 / 01 / 2017
Mailing Address 388 17th St. Suite 200		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.7633</b> Amount of Each Disbursement this Period [REDACTED] 447.00
City Oakland	State CA	Zip Code 94612
Purpose of Disbursement Rent		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] 1341.00
<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 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)  
**PROGRESSIVE KICK INDEPENDENT EXPENDITURES**

Full Name (Last, First, Middle Initial)

**A. LCB Associates**

Mailing Address 388 17th St.  
Suite 200

City Oakland State CA Zip Code 94612

Purpose of Disbursement  
Rent

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 05 / 2017

FEC Identification Number

C  
**Transaction ID : SB21B.7655**  
Amount of Each Disbursement this Period  
504.50

Memo Item

Full Name (Last, First, Middle Initial)

**B. Progressive Punch**

Mailing Address 1904 Franklin Street

City Oakland State CA Zip Code 94612

Purpose of Disbursement  
Reimbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 31 / 2017

FEC Identification Number

C  
**Transaction ID : SB21B.7570**  
Amount of Each Disbursement this Period  
1074.40

Memo Item

Full Name (Last, First, Middle Initial)

**C. Kaiser Foundation Health Insurance**

Mailing Address File 5915

City Los Angeles State CA Zip Code 90074

Purpose of Disbursement  
Insurance

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 31 / 2017

FEC Identification Number

C  
**Transaction ID : SB21B.7570.**  
Amount of Each Disbursement this Period  
492.62

Memo Item

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

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

1578.90

**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)  
**PROGRESSIVE KICK INDEPENDENT EXPENDITURES**

Full Name (Last, First, Middle Initial) <b>A. Amazon Hosting</b>		Date of Disbursement MM / DD / YYYY 01 / 31 / 2017
Mailing Address 410 Terry Ave North		FEC Identification Number C [ ] <b>Transaction ID : SB21B.7570.</b> Amount of Each Disbursement this Period [ ] 274.66
City Seattle	State WA	Zip Code 98109
Purpose of Disbursement Web Hosting	Category/ Type [ ]	
Candidate Name	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. Progressive Punch</b>		Date of Disbursement MM / DD / YYYY 02 / 28 / 2017
Mailing Address 1904 Franklin Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.7583</b> Amount of Each Disbursement this Period [ ] 1015.45
City Oakland	State CA	Zip Code 94612
Purpose of Disbursement Reimbursement	Category/ Type [ ]	
Candidate Name	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. Kaiser Foundation Health Insurance</b>		Date of Disbursement MM / DD / YYYY 02 / 28 / 2017
Mailing Address File 5915		FEC Identification Number C [ ] <b>Transaction ID : SB21B.7583.</b> Amount of Each Disbursement this Period [ ] 503.28
City Los Angeles	State CA	Zip Code 90074
Purpose of Disbursement Insurance	Category/ Type [ ]	
Candidate Name	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).....▶	[ ] 1015.45
<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)  
**PROGRESSIVE KICK INDEPENDENT EXPENDITURES**

Full Name (Last, First, Middle Initial) <b>A. Amazon Hosting</b>		Date of Disbursement MM / DD / YYYY 02 / 28 / 2017	
Mailing Address 410 Terry Ave North		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.7583.</b> Amount of Each Disbursement this Period 281.01	
City Seattle	State WA	Zip Code 98109	Category/ Type [REDACTED]
Purpose of Disbursement Web Hosting		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) ▼		Memo Item <input checked="" type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Progressive Punch</b>		Date of Disbursement MM / DD / YYYY 03 / 31 / 2017	
Mailing Address 1904 Franklin Street		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.7600</b> Amount of Each Disbursement this Period 1013.56	
City Oakland	State CA	Zip Code 94612	Category/ Type [REDACTED]
Purpose of Disbursement Reimbursement		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Kaiser Foundation Health Insurance</b>		Date of Disbursement MM / DD / YYYY 03 / 31 / 2017	
Mailing Address File 5915		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.7600.</b> Amount of Each Disbursement this Period 503.28	
City Los Angeles	State CA	Zip Code 90074	Category/ Type [REDACTED]
Purpose of Disbursement Insurance		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) ▼		Memo Item <input checked="" type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1013.56
<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)  
**PROGRESSIVE KICK INDEPENDENT EXPENDITURES**

Full Name (Last, First, Middle Initial) <b>A. Amazon Hosting</b>		Date of Disbursement MM / DD / YYYY 03 / 31 / 2017
Mailing Address 410 Terry Ave North		FEC Identification Number C [ ] <b>Transaction ID : SB21B.7600.</b> Amount of Each Disbursement this Period [ ] 257.00
City Seattle	State WA	Zip Code 98109
Purpose of Disbursement Web Hosting	Category/ Type [ ]	
Candidate Name	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) ▼		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. New York Times</b>		Date of Disbursement MM / DD / YYYY 03 / 31 / 2017
Mailing Address 620 8th Avenue		FEC Identification Number C [ ] <b>Transaction ID : SB21B.7600.2</b> Amount of Each Disbursement this Period [ ] 70.70
City New York	State NY	Zip Code 10018
Purpose of Disbursement Subscriptions	Category/ Type [ ]	
Candidate Name	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) ▼		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. Verizon Wireless</b>		Date of Disbursement MM / DD / YYYY 03 / 31 / 2017
Mailing Address PO Box 660108		FEC Identification Number C [ ] <b>Transaction ID : SB21B.7600.</b> Amount of Each Disbursement this Period [ ] 117.62
City Dallas	State TX	Zip Code 75266
Purpose of Disbursement Phones	Category/ Type [ ]	
Candidate Name	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) ▼		<input checked="" type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 0.00
<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 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)  
**PROGRESSIVE KICK INDEPENDENT EXPENDITURES**

Full Name (Last, First, Middle Initial) <b>A. Progressive Punch</b>			Date of Disbursement MM / DD / YYYY 04 / 30 / 2017	
Mailing Address 1904 Franklin Street			FEC Identification Number C [ ] <b>Transaction ID : SB21B.7629</b> Amount of Each Disbursement this Period [ ] 1047.55	
City Oakland	State CA	Zip Code 94612	Category/ Type [ ]	
Purpose of Disbursement Reimbursement		Candidate Name		
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) ▼		
			<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Kaiser Foundation Health Insurance</b>			Date of Disbursement MM / DD / YYYY 04 / 30 / 2017	
Mailing Address File 5915			FEC Identification Number C [ ] <b>Transaction ID : SB21B.7629.c</b> Amount of Each Disbursement this Period [ ] 492.62	
City Los Angeles	State CA	Zip Code 90074	Category/ Type [ ]	
Purpose of Disbursement Insurance		Candidate Name		
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) ▼		
			<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Amazon Hosting</b>			Date of Disbursement MM / DD / YYYY 04 / 30 / 2017	
Mailing Address 410 Terry Ave North			FEC Identification Number C [ ] <b>Transaction ID : SB21B.7629.</b> Amount of Each Disbursement this Period [ ] 278.48	
City Seattle	State WA	Zip Code 98109	Category/ Type [ ]	
Purpose of Disbursement Web Hosting		Candidate Name		
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) ▼		
			<input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 1047.55
<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)  
**PROGRESSIVE KICK INDEPENDENT EXPENDITURES**

Full Name (Last, First, Middle Initial)  
**A. New York Times**

Date of Disbursement: MM / DD / YYYY  
04 / 30 / 2017

Mailing Address 620 8th Avenue

City New York State NY Zip Code 10018

Purpose of Disbursement Subscriptions

Candidate Name

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

State: District:

FEC Identification Number: C

Transaction ID : SB21B.7629.1

Amount of Each Disbursement this Period: 56.35

Memo Item

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

Date of Disbursement: MM / DD / YYYY  
04 / 30 / 2017

Mailing Address PO Box 660108

City Dallas State TX Zip Code 75266

Purpose of Disbursement Phones

Candidate Name

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

State: District:

FEC Identification Number: C

Transaction ID : SB21B.7629.5

Amount of Each Disbursement this Period: 83.57

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Progressive Punch**

Date of Disbursement: MM / DD / YYYY  
05 / 31 / 2017

Mailing Address 1904 Franklin Street

City Oakland State CA Zip Code 94612

Purpose of Disbursement Reimbursement

Candidate Name

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

State: District:

FEC Identification Number: C

Transaction ID : SB21B.7654

Amount of Each Disbursement this Period: 939.43

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 939.43

**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)  
**PROGRESSIVE KICK INDEPENDENT EXPENDITURES**

Full Name (Last, First, Middle Initial) <b>A. Kaiser Foundation Health Insurance</b>		Date of Disbursement MM / DD / YYYY 05 / 31 / 2017	
Mailing Address File 5915		FEC Identification Number C [ ] <b>Transaction ID : SB21B.7654.1</b> Amount of Each Disbursement this Period [ ] 492.62	
City Los Angeles	State CA	Zip Code 90074	Category/ Type [ ]
Purpose of Disbursement Insurance		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) ▼		Amount of Each Disbursement this Period [ ] 492.62  <input checked="" type="checkbox"/> Memo Item
State: District:			
Full Name (Last, First, Middle Initial) <b>B. Amazon Hosting</b>		Date of Disbursement MM / DD / YYYY 05 / 31 / 2017	
Mailing Address 410 Terry Ave North		FEC Identification Number C [ ] <b>Transaction ID : SB21B.7654.1</b> Amount of Each Disbursement this Period [ ] 292.21	
City Seattle	State WA	Zip Code 98109	Category/ Type [ ]
Purpose of Disbursement Web Hosting		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) ▼		Amount of Each Disbursement this Period [ ] 292.21  <input checked="" type="checkbox"/> Memo Item
State: District:			
Full Name (Last, First, Middle Initial) <b>C. New York Times</b>		Date of Disbursement MM / DD / YYYY 05 / 31 / 2017	
Mailing Address 620 8th Avenue		FEC Identification Number C [ ] <b>Transaction ID : SB21B.7654.1</b> Amount of Each Disbursement this Period [ ] 12.63	
City New York	State NY	Zip Code 10018	Category/ Type [ ]
Purpose of Disbursement Subscriptions		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) ▼		Amount of Each Disbursement this Period [ ] 12.63  <input checked="" type="checkbox"/> Memo Item
State: District:			
<b>SUBTOTAL</b> of Disbursements This Page (optional)..... ▶		[ ] 0.00	
<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 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)  
**PROGRESSIVE KICK INDEPENDENT EXPENDITURES**

Full Name (Last, First, Middle Initial)

**A. Verizon Wireless**

Mailing Address PO Box 660108

City Dallas State TX Zip Code 75266

Purpose of Disbursement  
Phones

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 31 / 2017

FEC Identification Number

C  
Transaction ID : SB21B.7654.  
Amount of Each Disbursement this Period  
98.20

Memo Item

Full Name (Last, First, Middle Initial)

**B. Progressive Punch**

Mailing Address 1904 Franklin Street

City Oakland State CA Zip Code 94612

Purpose of Disbursement  
Reimbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify)

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2017

FEC Identification Number

C  
Transaction ID : SB21B.7674  
Amount of Each Disbursement this Period  
1063.84

Memo Item

Full Name (Last, First, Middle Initial)

**C. Kaiser Foundation Health Insurance**

Mailing Address File 5915

City Los Angeles State CA Zip Code 90074

Purpose of Disbursement  
Insurance

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2017

FEC Identification Number

C  
Transaction ID : SB21B.7674.  
Amount of Each Disbursement this Period  
492.62

Memo Item

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

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

1063.84

**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)  
**PROGRESSIVE KICK INDEPENDENT EXPENDITURES**

Full Name (Last, First, Middle Initial) <b>A. Amazon Hosting</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2017
Mailing Address 410 Terry Ave North		FEC Identification Number C [ ] <b>Transaction ID : SB21B.7674.</b> Amount of Each Disbursement this Period [ ] 333.68
City Seattle	State WA	Zip Code 98109
Purpose of Disbursement Web Hosting	Category/Type [ ]	
Candidate Name	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. New York Times</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2017
Mailing Address 620 8th Avenue		FEC Identification Number C [ ] <b>Transaction ID : SB21B.7674.2</b> Amount of Each Disbursement this Period [ ] 72.05
City New York	State NY	Zip Code 10018
Purpose of Disbursement Subscriptions	Category/Type [ ]	
Candidate Name	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. Verizon Wireless</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2017
Mailing Address PO Box 660108		FEC Identification Number C [ ] <b>Transaction ID : SB21B.7674.</b> Amount of Each Disbursement this Period [ ] 98.20
City Dallas	State TX	Zip Code 75266
Purpose of Disbursement Phones	Category/Type [ ]	
Candidate Name	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)..... ▶	[ ] 0.00
<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 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)  
**PROGRESSIVE KICK INDEPENDENT EXPENDITURES**

**A. Sandler, Reiff, Lamb, Rosenstein & Birkenstock, PC**

Full Name (Last, First, Middle Initial)

Mailing Address 1025 Vermont Ave., NW  
Suite 300

City Washington State DC Zip Code 20005

Purpose of Disbursement Legal Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 01 / 31 / 2017

FEC Identification Number: C

Transaction ID : SB21B.7571

Amount of Each Disbursement this Period: 960.00

Memo Item

**B. Stewart, Leslie, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 1904 Franklin Street

City Oakland State CA Zip Code 94612

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 01 / 15 / 2017

FEC Identification Number: C

Transaction ID : SB21B.7555

Amount of Each Disbursement this Period: 543.85

Memo Item

**C. Stewart, Leslie, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 1904 Franklin Street

City Oakland State CA Zip Code 94612

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 01 / 31 / 2017

FEC Identification Number: C

Transaction ID : SB21B.7566

Amount of Each Disbursement this Period: 744.08

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2247.93

**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 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)  
**PROGRESSIVE KICK INDEPENDENT EXPENDITURES**

Full Name (Last, First, Middle Initial) <b>A. Stewart, Leslie, , ,</b>		Date of Disbursement MM / DD / YYYY 02 / 15 / 2017	
Mailing Address 1904 Franklin Street		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.7577</b> Amount of Each Disbursement this Period [REDACTED] 802.01	
City Oakland	State CA	Zip Code 94612	Category/ Type [REDACTED]
Purpose of Disbursement Payroll		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Stewart, Leslie, , ,</b>		Date of Disbursement MM / DD / YYYY 02 / 28 / 2017	
Mailing Address 1904 Franklin Street		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.7589</b> Amount of Each Disbursement this Period [REDACTED] 622.40	
City Oakland	State CA	Zip Code 94612	Category/ Type [REDACTED]
Purpose of Disbursement Payroll		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Stewart, Leslie, , ,</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2017	
Mailing Address 1904 Franklin Street		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.7594</b> Amount of Each Disbursement this Period [REDACTED] 843.90	
City Oakland	State CA	Zip Code 94612	Category/ Type [REDACTED]
Purpose of Disbursement Payroll		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 2268.31
<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)  
**PROGRESSIVE KICK INDEPENDENT EXPENDITURES**

Full Name (Last, First, Middle Initial) <b>A. Stewart, Leslie, , ,</b>		Date of Disbursement MM / DD / YYYY 03 / 31 / 2017	
Mailing Address 1904 Franklin Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.7606</b> Amount of Each Disbursement this Period [ ] 1240.49	
City Oakland	State CA	Zip Code 94612	Category/ Type [ ]
Purpose of Disbursement Payroll			
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. Stewart, Leslie, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 15 / 2017	
Mailing Address 1904 Franklin Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.7616</b> Amount of Each Disbursement this Period [ ] 1741.04	
City Oakland	State CA	Zip Code 94612	Category/ Type [ ]
Purpose of Disbursement Payroll			
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. Stewart, Leslie, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 30 / 2017	
Mailing Address 1904 Franklin Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.7626</b> Amount of Each Disbursement this Period [ ] 466.20	
City Oakland	State CA	Zip Code 94612	Category/ Type [ ]
Purpose of Disbursement Payroll			
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).....▶	[ ] 3447.73
<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)  
**PROGRESSIVE KICK INDEPENDENT EXPENDITURES**

Full Name (Last, First, Middle Initial) <b>A. Stewart, Leslie, , ,</b>		Date of Disbursement MM / DD / YYYY 05 / 15 / 2017
Mailing Address 1904 Franklin Street		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.7638</b> Amount of Each Disbursement this Period [REDACTED] 401.09
City Oakland	State CA	Zip Code 94612
Purpose of Disbursement Payroll		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>B. Stewart, Leslie, , ,</b>		Date of Disbursement MM / DD / YYYY 05 / 31 / 2017
Mailing Address 1904 Franklin Street		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.7650</b> Amount of Each Disbursement this Period [REDACTED] 614.63
City Oakland	State CA	Zip Code 94612
Purpose of Disbursement Payroll		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. Stewart, Leslie, , ,</b>		Date of Disbursement MM / DD / YYYY 06 / 15 / 2017
Mailing Address 1904 Franklin Street		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.7662</b> Amount of Each Disbursement this Period [REDACTED] 653.81
City Oakland	State CA	Zip Code 94612
Purpose of Disbursement Payroll		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] 1669.53
<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)  
**PROGRESSIVE KICK INDEPENDENT EXPENDITURES**

Full Name (Last, First, Middle Initial) <b>A. Stewart, Leslie, , ,</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2017	
Mailing Address 1904 Franklin Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.7671</b> Amount of Each Disbursement this Period [ ] 633.72	
City Oakland	State CA	Zip Code 94612	Category/ Type [ ]
Purpose of Disbursement Payroll			
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. Tomlin, Chynnah, , ,</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2017	
Mailing Address 390 Andorra St		FEC Identification Number C [ ] <b>Transaction ID : SB21B.7676</b> Amount of Each Disbursement this Period [ ] - 200.00	
City Longs	State SC	Zip Code 29568	Category/ Type [ ]
Purpose of Disbursement Payroll - VOID CHECK			
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. UPS</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2017	
Mailing Address PO Box 7247-0244		FEC Identification Number C [ ] <b>Transaction ID : SB21B.7675</b> Amount of Each Disbursement this Period [ ] - 1.82	
City Philadelphia	State PA	Zip Code 19170	Category/ Type [ ]
Purpose of Disbursement Shipping VOID CHECK			
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).....▶	[ ] 431.90
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ] 82619.59

# 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)  
**PROGRESSIVE KICK INDEPENDENT EXPENDITURES**

**A. Progressive Punch**

Full Name (Last, First, Middle Initial)

Mailing Address 1904 Franklin Street

City Oakland State CA Zip Code 94612

Purpose of Disbursement Loan

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 13 / 2017

FEC Identification Number: C

Transaction ID : SB29.7659

Amount of Each Disbursement this Period: 2000.00

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	2000.00

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 44 OF 44
	FOR LINE NUMBER: (check only one)
<input checked="" type="checkbox"/>	9
<input type="checkbox"/>	10

NAME OF COMMITTEE (In Full)  
**PROGRESSIVE KICK INDEPENDENT EXPENDITURES**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Progressive Punch</b>			Nature of Debt (Purpose): Loan
Mailing Address 1904 Franklin Street			
City Oakland	State CA	Zip Code 94612	

Outstanding Balance Beginning This Period		Transaction ID : SD9.7683	
<input type="text" value="0.00"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="2000.00"/>	<input type="text" value="0.00"/>	<input type="text" value="2000.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period			
<input type="text"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text"/>	<input type="text"/>	<input type="text"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period			
<input type="text"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text"/>	<input type="text"/>	<input type="text"/>	

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="2000.00"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text" value="2000.00"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="2000.00"/>