

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)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
July 15 Quarterly Report (Q2)
[X] 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), Dec 20 (M12), Jan 31 (YE)

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

Election on M M / D D / Y Y Y Y Y Y in the State of

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

Election on M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period 07 01 2012 through 09 30 2012

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

Type or Print Name of Treasurer JOSHUA GROSSMAN

Signature of Treasurer JOSHUA GROSSMAN [Electronically Filed] Date 10 08 2012

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

Table with 10 columns for Office Use Only

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

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="2012"/>		87995.13
(b) Cash on Hand at Beginning of Reporting Period.....	113885.36	
(c) Total Receipts (from Line 19)	272025.83	614291.37
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	385911.19	702286.50
7. Total Disbursements (from Line 31).....	114053.18	430428.49
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	271858.01	271858.01
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

PROGRESSIVE KICK INDEPENDENT EXPENDITURES

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	243500.00	543100.02
(ii) Unitemized	1.00	556.12
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	243501.00	543656.14
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	28500.00	67000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	272001.00	610656.14
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.15	3500.15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	24.68	135.08
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))..... ▶	272025.83	614291.37
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	272025.83	614291.37

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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	68091.18	106492.52
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	68091.18	106492.52
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	217388.12
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	28500.00
(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	28500.00
29. Other Disbursements	45962.00	78047.85
30. Federal Election Activity (2 U.S.C. §431(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)) ..	114053.18	430428.49
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	114053.18	430428.49

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	272001.00	610656.14
34. Total Contribution Refunds (from Line 28(d))	0.00	28500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	272001.00	582156.14
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	68091.18	106492.52
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.15	3500.15
38. Net Operating Expenditures (subtract Line 37 from Line 36)	68091.03	102992.37

**SCHEDULE A (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 15
<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. Laura Belin
Full Name (Last, First, Middle Initial)

Mailing Address 1705 Plaza Circle

City Windsor Heights	State IA	Zip Code 50324
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self	Occupation Writer
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2012

Transaction ID : SA11AI.4509

Amount of Each Receipt this Period
1500.00

B. Robert Fertik
Full Name (Last, First, Middle Initial)

Mailing Address Box 721066

City Jackson Heights	State NY	Zip Code 11372
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FEC ID number of contributing federal political committee. **C**

Name of Employer Democrats.com	Occupation Owner
-----------------------------------	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 06 / 2012

Transaction ID : SA11AI.4487

Amount of Each Receipt this Period
50000.00

C. Lawrence & Susan Hess
Full Name (Last, First, Middle Initial)

Mailing Address 6309 Cypress Point Rd.

City San Diego	State CA	Zip Code 92120
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self	Occupation Investor/Homemaker
--------------------------	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
170000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 07 / 2012

Transaction ID : SA11AI.4484

Amount of Each Receipt this Period
40000.00

SUBTOTAL of Receipts This Page (optional).....	91500.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 7 OF 15
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
PROGRESSIVE KICK INDEPENDENT EXPENDITURES

A. Lawrence & Susan Hess
 Full Name (Last, First, Middle Initial)
 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 Self Occupation Investor/Homemaker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207000.00

Date of Receipt 09 / 24 / 2012
Transaction ID : SA11AI.4518
 Amount of Each Receipt this Period 37000.00

B. Stephen Nash
 Full Name (Last, First, Middle Initial)
 Mailing Address 9108 Windover Ct.
 City Richmond State VA Zip Code 23229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University of Richmond Occupation Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 27 / 2012
Transaction ID : SA11AI.4519
 Amount of Each Receipt this Period 5000.00

C. National Nurses United
 Full Name (Last, First, Middle Initial)
 Mailing Address 8630 Fenton Street Suite 1100
 City Silver Spring State MD Zip Code 20910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 09 / 06 / 2012
Transaction ID : SA11AI.4489
 Amount of Each Receipt this Period 50000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 92000.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 8 OF 15
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
PROGRESSIVE KICK INDEPENDENT EXPENDITURES

A. Full Name (Last, First, Middle Initial)
Margorie Roswell

Mailing Address 3443 Guilford Ter

City Baltimore	State MD	Zip Code 21218
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FEC ID number of contributing federal political committee. **C**

Name of Employer Roswell Infographics	Occupation Web Developer
--	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
73000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08	/	08	/	2012

Transaction ID : SA11AI.4486

Amount of Each Receipt this Period
60000.00

B. Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	60000.00
TOTAL This Period (last page this line number only).....▶	243500.00

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

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NAME OF COMMITTEE (In Full)
PROGRESSIVE KICK INDEPENDENT EXPENDITURES

Full Name (Last, First, Middle Initial) A. MOVEON.ORG POLITICAL ACTION		Date of Receipt
Mailing Address PO BOX 9218		<input type="text" value="09"/> / <input type="text" value="18"/> / <input type="text" value="2012"/>
City	State	Zip Code
BERKELEY	CA	94709
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00341396"/>	Transaction ID : SA11C.4495
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="49500.00"/>	<input type="text" value="21000.00"/>

Full Name (Last, First, Middle Initial) B. MOVEON.ORG POLITICAL ACTION		Date of Receipt
Mailing Address PO BOX 9218		<input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2012"/>
City	State	Zip Code
BERKELEY	CA	94709
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00341396"/>	Transaction ID : SA11C.4521
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="57000.00"/>	<input type="text" value="7500.00"/>

Full Name (Last, First, Middle Initial) C.		Date of Receipt
Mailing Address		<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State	Zip Code
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text"/>	Amount of Each Receipt this Period
Name of Employer	Occupation	<input type="text"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="28500.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value="28500.00"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
PROGRESSIVE KICK INDEPENDENT EXPENDITURES

Full Name (Last, First, Middle Initial)

A. AmCheck

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
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2012

Transaction ID : SB21B.4501

Amount of Each Disbursement this Period

432.74

Full Name (Last, First, Middle Initial)

B. AmCheck

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
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2012

Transaction ID : SB21B.4502

Amount of Each Disbursement this Period

33.00

Full Name (Last, First, Middle Initial)

C. Katherine Carraher

Mailing Address 1904 Franklin St.

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) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2012

Transaction ID : SB21B.4496

Amount of Each Disbursement this Period

602.31

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

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

1068.05

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
PROGRESSIVE KICK INDEPENDENT EXPENDITURES

Full Name (Last, First, Middle Initial)
A. COOPERATIVE CREDIT UNION FCU

Mailing Address 2001 ASHBY AVE.

City BERKELEY State CA Zip Code 94703

Purpose of Disbursement
Bank Charges

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
08 / 07 / 2012

Transaction ID : **SB21B.4531**

Amount of Each Disbursement this Period
10.00

Full Name (Last, First, Middle Initial)
B. COOPERATIVE CREDIT UNION FCU

Mailing Address 2001 ASHBY AVE.

City BERKELEY State CA Zip Code 94703

Purpose of Disbursement
Bank Charges

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 30 / 2012

Transaction ID : **SB21B.4527**

Amount of Each Disbursement this Period
1.00

Full Name (Last, First, Middle Initial)
C. DS Political

Mailing Address 1133 19th Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non-Federal Advertising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 21 / 2012

Transaction ID : **SB21B.4517**

Amount of Each Disbursement this Period
64874.70

SUBTOTAL of Disbursements This Page (optional)..... ▶ 64885.70

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

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NAME OF COMMITTEE (In Full)
PROGRESSIVE KICK INDEPENDENT EXPENDITURES

Full Name (Last, First, Middle Initial)

A. JOSHUA GROSSMAN

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) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2012

Transaction ID : SB21B.4498

Amount of Each Disbursement this Period

709.71

Full Name (Last, First, Middle Initial)

B. Sandler, Reiff, Young & Lamb, PC

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) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 03 / 2012

Transaction ID : SB21B.4479

Amount of Each Disbursement this Period

582.50

Full Name (Last, First, Middle Initial)

C. Leslie Stewart

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) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2012

Transaction ID : SB21B.4500

Amount of Each Disbursement this Period

8.02

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

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

1300.23

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
PROGRESSIVE KICK INDEPENDENT EXPENDITURES

Full Name (Last, First, Middle Initial)
A. Peter Sullivan

Date of Disbursement
MM / DD / YYYY
09 / 18 / 2012

Mailing Address 1904 Franklin Street

City State Zip Code
Oakland CA 94612

Purpose of Disbursement
Payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID : **SB21B.4499**

Amount of Each Disbursement this Period
678.16

Category/Type

Full Name (Last, First, Middle Initial)
B.

Date of Disbursement
MM / DD / YYYY

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Amount of Each Disbursement this Period

Category/Type

Full Name (Last, First, Middle Initial)
C.

Date of Disbursement
MM / DD / YYYY

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Amount of Each Disbursement this Period

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... ▶ 678.16

TOTAL This Period (last page this line number only)..... ▶ 67932.14

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" 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. America Votes Action Fund-MN

Mailing Address 1155 Connecticut Ave., NW
Suite 600

City Washington State DC Zip Code 20036

Purpose of Disbursement
Non-Federal Donation

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.4524

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Crazy Bridge Studios

Mailing Address 229 N. Central Ave

City Glendale State CA Zip Code 91203

Purpose of Disbursement
Media Production-Non-Federal

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.4491

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Oregon Working Families Party

Mailing Address 1130 SW Morrison St. Suite 407

City Portland State OR Zip Code 97205

Purpose of Disbursement
Non-Federal Contribution

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.4516

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" 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. The Campaign Network

Mailing Address 140 Bayswater St.

City Boston State MA Zip Code 02128

Purpose of Disbursement
Media Production-Non-Federal

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
09 / 21 / 2012

Transaction ID : SB29.4514

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Washington CAN!

Mailing Address 220 S. River St.

City Seattle State WA Zip Code 98108

Purpose of Disbursement
Non-Federal GOTV Canvassing

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
09 / 14 / 2012

Transaction ID : SB29.4493

Amount of Each Disbursement this Period

15000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

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

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

20000.00

45962.00