

# 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

For Our Future

ADDRESS (number and street) PO Box 15845

Check if different than previously reported. (ACC) Washington DC 20003

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

C C00620971

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

### 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- |                                      |                                      |                                       |  |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)  | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)  | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE)                           |

- (c) 12-Day PRE-Election Report for the:
- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> 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:
- |  |                                       |  |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

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

5. Covering Period M M / D D / Y Y Y Y Y Y 11 / 29 / 2022 through M M / D D / Y Y Y Y Y Y 12 / 31 / 2022

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

Unger, Ben, , ,

Type or Print Name of Treasurer

Signature of Treasurer Unger, Ben, , , [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 01 / 31 / 2023

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

Office Use Only									
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**For Our Future**

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="2022"/>		<input type="text" value="2143104.20"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="4907005.60"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="47704.36"/>	<input type="text" value="6575065.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="4954709.96"/>	<input type="text" value="8718169.20"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="604145.66"/>	<input type="text" value="4367604.90"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="4350564.30"/>	<input type="text" value="4350564.30"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="4000000.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**For Our Future**

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).....	46000.00	3734862.75
(ii) Unitemized .....	20.00	250.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	46020.00	3735112.75
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	2800000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	46020.00	6535112.75
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	35816.03
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	1684.36	4136.22
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)).....▶	47704.36	6575065.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	47704.36	6575065.00

**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 .....	63790.36	- 630910.11
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	63790.36	- 630910.11
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) .....	253826.69	1819695.24
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).....	286528.61	3178819.77
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)) ..	604145.66	4367604.90
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	604145.66	4367604.90

**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) .....	46020.00	6535112.75
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	46020.00	6535112.75
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	63790.36	- 630910.11
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	35816.03
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	63790.36	- 666726.14

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

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

FOR LINE NUMBER: PAGE 6 OF 25  
(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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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)  
**For Our Future**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**United We Can Michigan**

Mailing Address 3031 W Grand Blvd

City Detroit	State MI	Zip Code 48202-3046
-----------------	-------------	------------------------

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 ▼  
46000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
12		08		2022

**Transaction ID : VSH7WV7AQ08**

Amount of Each Receipt this Period  
46000.00

Memo Item

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

Mailing Address

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

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

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

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	46000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	46000.00

**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 25
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**For Our Future**

**A. Amalgamated Bank**

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

Mailing Address 1825 K St NW

City Washington	State DC	Zip Code 20006-1245
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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 ▼  
4136.22

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	30	/	2022

**Transaction ID : VSH7WV7AP20**

Amount of Each Receipt this Period  
951.43

Memo Item

Interest

**B. Amalgamated Bank**

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

Mailing Address 1825 K St NW

City Washington	State DC	Zip Code 20006-1245
--------------------	-------------	------------------------

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 ▼  
4136.22

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2022

**Transaction ID : VSH7WV6BQ62**

Amount of Each Receipt this Period  
732.93

Memo Item

Interest

**C.**

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

Mailing Address

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

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1684.36
<b>TOTAL</b> This Period (last page this line number only).....▶	1684.36

**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)  
**For Our Future**

Full Name (Last, First, Middle Initial)

**A. Scale to Win**

Mailing Address 13742 Harper St

City Santa Ana State CA Zip Code 92703-1419

Purpose of Disbursement  
Digital Communications - No Express Advocacy

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
12			02			2022			

FEC Identification Number

**C** [Redacted]  
**Transaction ID : VSG8MA350F**  
Amount of Each Disbursement this Period  
[Redacted] 24956.34

Memo Item

Full Name (Last, First, Middle Initial)

**B. Renaissance Campaign Strategies**

Mailing Address 437 Madison Ave

City New York State NY Zip Code 10022-7001

Purpose of Disbursement  
Strategic Consulting Services

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			23			2022			

FEC Identification Number

**C** [Redacted]  
**Transaction ID : VSG8MA377H**  
Amount of Each Disbursement this Period  
[Redacted] 8875.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Intuit**

Mailing Address 2700 Coast Ave

City Mountain View State CA Zip Code 94043-1140

Purpose of Disbursement  
Software

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
12			01			2022			

FEC Identification Number

**C** [Redacted]  
**Transaction ID : VSG8MA34M**  
Amount of Each Disbursement this Period  
[Redacted] 212.00

Memo Item

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

[Redacted] 34043.34

**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)  
**For Our Future**

**A. Devasier, Kyle, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 15843

City Washington State DC Zip Code 20003-0843

Purpose of Disbursement Staff Meals and Event Supplies Reimbursement - See Below if Itemized

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 12 / 02 / 2022

FEC Identification Number: C

Transaction ID : VSG8MA34NI

Amount of Each Disbursement this Period: 267.00

Memo Item

**B. Amalgamated Bank**

Full Name (Last, First, Middle Initial)

Mailing Address 1825 K St NW

City Washington State DC Zip Code 20006-1245

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 11 / 30 / 2022

FEC Identification Number: C

Transaction ID : VSG8MA34K!

Amount of Each Disbursement this Period: 2.50

Memo Item

**C. MBA Consulting Group**

Full Name (Last, First, Middle Initial)

Mailing Address 611 Pennsylvania Ave SE Num 143

City Washington State DC Zip Code 20003-4303

Purpose of Disbursement Compliance Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 12 / 12 / 2022

FEC Identification Number: C

Transaction ID : VSG8MA377!

Amount of Each Disbursement this Period: 7500.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 7769.50

**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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Amalgamated Bank</b>		Date of Disbursement MM / DD / YYYY 12 / 30 / 2022
Mailing Address 1825 K St NW		FEC Identification Number <b>C</b> <b>Transaction ID : VSG8MA377V</b> Amount of Each Disbursement this Period 2.50
City Washington	State DC	
Zip Code 20006-1245		Memo Item <input type="checkbox"/>
Purpose of Disbursement Bank Fee	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. Bill.com</b>		Date of Disbursement MM / DD / YYYY 12 / 29 / 2022
Mailing Address 1810 Embarcadero Rd		FEC Identification Number <b>C</b> <b>Transaction ID : VSG8MA377V</b> Amount of Each Disbursement this Period 1214.76
City Palo Alto	State CA	
Zip Code 94303-3308		Memo Item <input type="checkbox"/>
Purpose of Disbursement Subscription	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. Renaissance Campaign Strategies</b>		Date of Disbursement MM / DD / YYYY 12 / 02 / 2022
Mailing Address 437 Madison Ave		FEC Identification Number <b>C</b> <b>Transaction ID : VSG8MA34M</b> Amount of Each Disbursement this Period 8875.00
City New York	State NY	
Zip Code 10022-7001		Memo Item <input type="checkbox"/>
Purpose of Disbursement Strategic Consulting Services	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).....▶	10092.26
<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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Kinetic21, LLC</b>		Date of Disbursement MM / DD / YYYY 12 / 22 / 2022
Mailing Address 667 S Mountain Rd		FEC Identification Number C <b>Transaction ID : VSG8MA377</b> Amount of Each Disbursement this Period 3000.00
City New City	State NY	
Zip Code 10956-5709	Purpose of Disbursement Strategic Consulting 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. Perkins, Dawn, , ,</b>		Date of Disbursement MM / DD / YYYY 12 / 07 / 2022
Mailing Address PO Box 34390		FEC Identification Number C <b>Transaction ID : VSG8MA3783</b> Amount of Each Disbursement this Period 95.13
City Washington	State DC	
Zip Code 20043-4390	Purpose of Disbursement Event Supplies Reimbursement - See Below if Itemized	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. Amalgamated Bank</b>		Date of Disbursement MM / DD / YYYY 12 / 23 / 2022
Mailing Address 1825 K St NW		FEC Identification Number C <b>Transaction ID : VSG8MA377</b> Amount of Each Disbursement this Period 91.65
City Washington	State DC	
Zip Code 20006-1245	Purpose of Disbursement Bank Fee	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).....▶	3186.78
<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

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)  
**For Our Future**

Full Name (Last, First, Middle Initial)  
**A. Hilltop Public Solutions LLC**

Mailing Address 3000 K St NW  
Ste 320

City Washington State DC Zip Code 20007-5169

Purpose of Disbursement Strategic Consulting Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 12 / 13 / 2022

FEC Identification Number: C

Transaction ID : VSG8MA377I

Amount of Each Disbursement this Period: 3000.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Trister, Ross, Schadler & Gold, PLLC**

Mailing Address 1666 Connecticut Ave NW  
Ste 5

City Washington State DC Zip Code 20009-1039

Purpose of Disbursement Legal Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 12 / 22 / 2022

FEC Identification Number: C

Transaction ID : VSG8MA377S

Amount of Each Disbursement this Period: 290.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Bill.com**

Mailing Address 1810 Embarcadero Rd

City Palo Alto State CA Zip Code 94303-3308

Purpose of Disbursement Subscription

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 11 / 29 / 2022

FEC Identification Number: C

Transaction ID : VSG8MA34K

Amount of Each Disbursement this Period: 615.86

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 3905.86

**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)  
**For Our Future**

Full Name (Last, First, Middle Initial) <b>A. Spector Roh Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y Y 12 / 07 / 2022	
Mailing Address 744 Williamson St Ste 300		FEC Identification Number C [ ] <b>Transaction ID : VSG8MA378z</b> Amount of Each Disbursement this Period [ ] 4500.00	
City Madison State WI Zip Code 53703-4579	Purpose of Disbursement Communications Consulting Services Candidate Name [ ] Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. Amalgamated Bank</b>		Date of Disbursement M M / D D / Y Y Y Y Y 12 / 23 / 2022	
Mailing Address 1825 K St NW		FEC Identification Number C [ ] <b>Transaction ID : VSG8MA377X</b> Amount of Each Disbursement this Period [ ] 291.82	
City Washington State DC Zip Code 20006-1245	Purpose of Disbursement Bank Fee Candidate Name [ ] Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y Y	
Mailing Address		FEC Identification Number C [ ] Amount of Each Disbursement this Period [ ]	
City State Zip Code	Purpose of Disbursement Candidate Name [ ] Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4791.82
<b>TOTAL</b> This Period (last page this line number only).....▶	63789.56

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

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
**For Our Future**

**A. The Outreach Team**

Full Name (Last, First, Middle Initial)

Mailing Address 407 College Ave  
Ste 349

City Ithaca State NY Zip Code 14850-6701

Purpose of Disbursement Non-Federal Canvassing Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
11 / 29 / 2022

FEC Identification Number: C

Transaction ID : VSG8MA35NI

Amount of Each Disbursement this Period: 204500.00

Memo Item

**B. For Our Future Michigan**

Full Name (Last, First, Middle Initial)

Mailing Address 27600 Northwestern Hwy  
Ste 120

City Southfield State MI Zip Code 48034-8466

Purpose of Disbursement Non-Federal Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
12 / 05 / 2022

FEC Identification Number: C

Transaction ID : VSG8MA34M'

Amount of Each Disbursement this Period: 40000.00

Memo Item

**C. Scale to Win**

Full Name (Last, First, Middle Initial)

Mailing Address 13742 Harper St

City Santa Ana State CA Zip Code 92703-1419

Purpose of Disbursement Non-Federal Digital Communications

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
12 / 02 / 2022

FEC Identification Number: C

Transaction ID : VSG8MA350I

Amount of Each Disbursement this Period: 12015.89

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 256515.89

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
**For Our Future**

**A. The Outreach Team**

Full Name (Last, First, Middle Initial)

Mailing Address 407 College Ave  
Ste 349

City Ithaca State NY Zip Code 14850-6701

Purpose of Disbursement Non-Federal Canvassing Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 12 / 14 / 2022

FEC Identification Number: C

Transaction ID : VSG8MA35NI

Amount of Each Disbursement this Period: 30000.00

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  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

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  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	30000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	286515.89

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

**LOANS**

NAME OF COMMITTEE (In Full) **Transaction ID : VSG8MA22VX9L**  
**For Our Future**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) For Our Future Action Fund			<input checked="" type="checkbox"/> N <input type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO Box 34390				
City Washington	State DC	ZIP Code 20043-4390		

Original Amount of Loan 2000000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 2000000.00
---------------------------------------	------------------------------------	---

**TERMS**

Date Incurred MM / DD / YYYY 03 / 29 / 2021	Date Due MM / DD / YYYY 12 / 31 / 2022	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---	--	-------------------------------	---

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City State ZIP Code	Amount Guaranteed Outstanding: [ ]		
2. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City State ZIP Code	Amount Guaranteed Outstanding: [ ]		
3. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City State ZIP Code	Amount Guaranteed Outstanding: [ ]		
4. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City State ZIP Code	Amount Guaranteed Outstanding: [ ]		

<b>SUBTOTALS</b> This Period This Page (optional) .....	▶	[ ] 2000000.00
<b>TOTALS</b> This Period (last page in this line only) .....	▶	[ ]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.



SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : VSG8MA2GXS3L**  
**For Our Future**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) For Our Future Action Fund		<input checked="" type="checkbox"/> Memo Item	<b>Election:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO Box 34390			
City Washington	State DC	ZIP Code 20043-4390	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2000000.00	0.00	2000000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
12 / 20 / 2021	12 / 31 / 2022	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional) .....	▶	2000000.00
<b>TOTALS</b> This Period (last page in this line only) .....	▶	4000000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 18 OF 25
	FOR LINE NUMBER: (check only one)
	<input type="checkbox"/> 9
	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**For Our Future**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Scale to Win</b>			Nature of Debt (Purpose): Phone Bank (Estimate)
Mailing Address 13742 Harper St			
City Santa Ana	State CA	Zip Code 92703-1419	

Outstanding Balance Beginning This Period <input type="text" value="154.95"/>	Transaction ID : VSEA49HACD0	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="154.95"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Scale to Win</b>			Nature of Debt (Purpose): Non-Federal Digital Communications
Mailing Address 13742 Harper St			
City Santa Ana	State CA	Zip Code 92703-1419	

Outstanding Balance Beginning This Period <input type="text" value="12015.89"/>	Transaction ID : VSEA49HAD82	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="12015.89"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Scale to Win</b>			Nature of Debt (Purpose): Digital Communications (Estimate)
Mailing Address 13742 Harper St			
City Santa Ana	State CA	Zip Code 92703-1419	

Outstanding Balance Beginning This Period <input type="text" value="6988.25"/>	Transaction ID : VSEA49HACC2	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="6988.25"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

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

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 19 OF 25
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)  
**For Our Future**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Scale to Win</b>			Nature of Debt (Purpose): Phone Bank (Estimate)
Mailing Address 13742 Harper St			
City Santa Ana	State CA	Zip Code 92703-1419	

Outstanding Balance Beginning This Period 154.95	Transaction ID : VSEA49HACH2	
Amount Incurred This Period 0.00	Payment This Period 154.95	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Scale to Win</b>			Nature of Debt (Purpose): Phone Bank
Mailing Address 13742 Harper St			
City Santa Ana	State CA	Zip Code 92703-1419	

Outstanding Balance Beginning This Period 41506.70	Transaction ID : VSEA49HAD74	
Amount Incurred This Period 0.00	Payment This Period 41506.70	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>The Outreach Team</b>			Nature of Debt (Purpose): Canvassing Services (Estimate)
Mailing Address 407 College Ave Ste 349			
City Ithaca	State NY	Zip Code 14850-6701	

Outstanding Balance Beginning This Period 204500.00	Transaction ID : VSEA49HADB5	
Amount Incurred This Period 0.00	Payment This Period 204500.00	Outstanding Balance at Close of This Period 0.00

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

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 20 OF 25
	FOR LINE NUMBER: (check only one)
	<input type="checkbox"/> 9
	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**For Our Future**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Scale to Win</b>			Nature of Debt (Purpose): Phone Bank (Estimate)
Mailing Address 13742 Harper St			
City Santa Ana	State CA	Zip Code 92703-1419	

Outstanding Balance Beginning This Period <input type="text" value="154.95"/>	<b>Transaction ID : VSEA49HACF6</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="154.95"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Scale to Win</b>			Nature of Debt (Purpose): Phone Bank
Mailing Address 13742 Harper St			
City Santa Ana	State CA	Zip Code 92703-1419	

Outstanding Balance Beginning This Period <input type="text" value="211.94"/>	<b>Transaction ID : VSEA49HADA7</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="211.94"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Scale to Win</b>			Nature of Debt (Purpose): Phone Bank (Estimate)
Mailing Address 13742 Harper St			
City Santa Ana	State CA	Zip Code 92703-1419	

Outstanding Balance Beginning This Period <input type="text" value="154.95"/>	<b>Transaction ID : VSEA49HACE8</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="154.95"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

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

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 21 OF 25
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**For Our Future**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Scale to Win</b>			Nature of Debt (Purpose): Digital Communications
Mailing Address 13742 Harper St			
City Santa Ana	State CA	Zip Code 92703-1419	

Outstanding Balance Beginning This Period		Transaction ID : VSEA49HAD99	
24956.34			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	24956.34	0.00	

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			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

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			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

1) SUBTOTALS This Period This Page (optional)..... ▶	0.00
2) TOTALS This Period (last page this line number only)..... ▶	0.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ..... ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) For Our Future
FEC IDENTIFICATION NUMBER C C00620971

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Scale to Win
Mailing Address 13742 Harper St
City Santa Ana State CA Zip Code 92703-1419
Purpose of Expenditure Phone Bank
Date of Public Distribution/Dissemination 10/16/2022
Amount 154.95
Transaction ID : VSG8MA351A1
Date of Disbursement or Obligation 11/29/2022

Name of Federal Candidate: LEE, SUSIE, , ,
Support Oppose
Office Sought: House District: 03
President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought 90892.38
Disbursement For: Primary General 2022
Other (specify)

Full Name of Payee Scale to Win
Mailing Address 13742 Harper St
City Santa Ana State CA Zip Code 92703-1419
Purpose of Expenditure Phone Bank
Date of Public Distribution/Dissemination 10/16/2022
Amount 154.95
Transaction ID : VSG8MA351E3
Date of Disbursement or Obligation 11/29/2022

Name of Federal Candidate: TITUS, DINA, , ,
Support Oppose
Office Sought: House District: 01
President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought 75765.58
Disbursement For: Primary General 2022
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 309.90
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Unger, Ben, , , [Electronically Filed] Date 01/31/2023
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) For Our Future
FEC IDENTIFICATION NUMBER C C00620971

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Scale to Win
Mailing Address 13742 Harper St
City Santa Ana State CA Zip Code 92703-1419
Purpose of Expenditure Phone Bank
Name of Federal Candidate: DEMINGS, VAL, , ,
Calendar Year-To-Date Per Election for Office Sought 112560.94

Full Name of Payee Scale to Win
Mailing Address 13742 Harper St
City Santa Ana State CA Zip Code 92703-1419
Purpose of Expenditure Digital Communications
Name of Federal Candidate: FETTERMAN, JOHN KARL, , ,
Calendar Year-To-Date Per Election for Office Sought 783512.55

(a) SUBTOTAL of Itemized Independent Expenditures 48494.95
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Unger, Ben, , ,

[Electronically Filed]

Date 01 / 31 / 2023

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) For Our Future
FEC IDENTIFICATION NUMBER C C00620971

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Scale to Win
Mailing Address 13742 Harper St
City Santa Ana State CA Zip Code 92703-1419
Purpose of Expenditure Phone Bank
Date of Public Distribution/Dissemination 10/16/2022
Amount 154.95
Transaction ID : VSG8MA35186
Date of Disbursement or Obligation 11/29/2022

Name of Federal Candidate: KRAUSE, E M, ,
Support Oppose
Office Sought: House District: 02
President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought 46768.76
Disbursement For: Primary General 2022 Other (specify)

Full Name of Payee Scale to Win
Mailing Address 13742 Harper St
City Santa Ana State CA Zip Code 92703-1419
Purpose of Expenditure Phone Bank
Date of Public Distribution/Dissemination 10/16/2022
Amount 154.95
Transaction ID : VSG8MA351C7
Date of Disbursement or Obligation 11/29/2022

Name of Federal Candidate: HORSFORD, STEVEN ALEXZANDER, ,
Support Oppose
Office Sought: House District: 04
President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought 76400.13
Disbursement For: Primary General 2022 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 309.90
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Unger, Ben, , [Electronically Filed] Date 01/31/2023



**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>For Our Future</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.5em; font-weight: bold; margin-right: 5px;">C</span> C00620971                 </div>
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Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>Scale to Win</b>	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; margin-right: 5px;">M M / D D / Y Y Y Y Y Y</span> </div>
Mailing Address 13742 Harper St	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"> <span style="float: right; font-weight: bold;">211.94</span> </div>
City State Zip Code Santa Ana CA 92703-1419	
Purpose of Expenditure Phone Bank	
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Johnson, Ronald Harold, , ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: WI <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought <span style="float: right; border: 1px solid black; padding: 2px;">346365.53</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item <b>The Outreach Team</b>	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; margin-right: 5px;">M M / D D / Y Y Y Y Y Y</span> </div>
Mailing Address 407 College Ave Ste 349	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"> <span style="float: right; font-weight: bold;">204500.00</span> </div>
City State Zip Code Ithaca NY 14850-6701	
Purpose of Expenditure Canvassing Services (Estimate)	
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose FETTERMAN, JOHN KARL, , ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: PA <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought <span style="float: right; border: 1px solid black; padding: 2px;">783512.55</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶ _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"> <span style="float: right; font-weight: bold;">204711.94</span> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"> <span style="float: right; font-weight: bold;">0.00</span> </div>
<b>(c) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"> <span style="float: right; font-weight: bold;">253826.69</span> </div>

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*Unger, Ben, , ,*

*[Electronically Filed]*

Date M M / D D / Y Y Y Y Y Y  
01 / 31 / 2023

Signature