

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

Community Change Voters

ADDRESS (number and street) 1536 U Street NW

Check if different than previously reported. (ACC) Washington DC 20009

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

C C00612820

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 07 / 01 / 2023 through M M / D D / Y Y Y Y Y Y 12 / 31 / 2023

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 Berman, Jeff, , ,

Signature of Treasurer Berman, Jeff, , , Date M M / D D / Y Y Y Y Y Y 01 / 22 / 2024

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

Community Change Voters

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="2023"/>	<input type="text" value="578038.39"/>	<input type="text" value="578038.39"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="621281.95"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="503212.40"/>	<input type="text" value="591772.92"/>
(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="1124494.35"/>	<input type="text" value="1169811.31"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="24096.18"/>	<input type="text" value="69413.14"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="1100398.17"/>	<input type="text" value="1100398.17"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY 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 the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Community Change Voters

Report Covering the Period: From: MM / DD / YYYY 07 / 01 / 2023 To: MM / DD / YYYY 12 / 31 / 2023

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).....	503000.00	523000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	503000.00	523000.00
(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)	503000.00	523000.00
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).....	212.40	18772.92
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	50000.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	503212.40	591772.92
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	503212.40	591772.92

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	24096.18	49913.14
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	24096.18	49913.14
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).....	0.00	19500.00
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)) ..	24096.18	69413.14
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	24096.18	69413.14

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	503000.00	523000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	503000.00	523000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	24096.18	49913.14
37. Offsets to Operating Expenditures (from Line 15, page 3).....	212.40	18772.92
38. Net Operating Expenditures (subtract Line 37 from Line 36)	23883.78	31140.22

**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 17
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)
Community Change Voters

A. Simons, Elizabeth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 383 Walsh Road
 City Atherton State CA Zip Code 94027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 03 / 2023
Transaction ID : A-87
 Amount of Each Receipt this Period
 500000.00
 Memo Item

B. AFT Solidarity
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 555 New Jersey Avenue Northwest
 City Washington State DC Zip Code 20001
 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 ▼ 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 25 / 2023
Transaction ID : A-94
 Amount of Each Receipt this Period
 3000.00
 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
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	503000.00
TOTAL This Period (last page this line number only).....▶	503000.00

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 17
<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)
Community Change Voters

A. Community Change Voters Colorado

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

Mailing Address 1536 U Street Northwest

City Washington	State DC	Zip Code 20009
--------------------	-------------	-------------------

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 ▼
212.40

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		01		2023

Transaction ID : A-111

Amount of Each Receipt this Period
212.40

Memo Item

Refund

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

SUBTOTAL of Receipts This Page (optional).....▶	212.40
TOTAL This Period (last page this line number only).....▶	212.40

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)

Community Change Voters

Full Name (Last, First, Middle Initial)

A. CommonCentsConsulting, LLC

Mailing Address PO Box 26430

City
Tempe

State
AZ

Zip Code
85285

Purpose of Disbursement
Compliance & Accounting Services

001
Category/
Type

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 Y Y
 07 / 06 / 2023

FEC Identification Number

C [REDACTED]

Transaction ID : B-77

Amount of Each Disbursement this Period

[REDACTED] 2250.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CommonCentsConsulting, LLC

Mailing Address PO Box 26430

City
Tempe

State
AZ

Zip Code
85285

Purpose of Disbursement
Compliance & Accounting Services

001
Category/
Type

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 Y Y
 07 / 06 / 2023

FEC Identification Number

C [REDACTED]

Transaction ID : B-78

Amount of Each Disbursement this Period

[REDACTED] 275.00

Memo Item

Full Name (Last, First, Middle Initial)

C. CommonCentsConsulting, LLC

Mailing Address PO Box 26430

City
Tempe

State
AZ

Zip Code
85285

Purpose of Disbursement
Compliance & Accounting Services

001
Category/
Type

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 Y Y
 07 / 06 / 2023

FEC Identification Number

C [REDACTED]

Transaction ID : B-79

Amount of Each Disbursement this Period

[REDACTED] 275.00

Memo Item

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

[REDACTED] 2800.00

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)

Community Change Voters

Full Name (Last, First, Middle Initial)

A. Amalgamated Bank

Mailing Address 275 7th Avenue

City
New York

State
NY

Zip Code
10001

Purpose of Disbursement

Bank Fee

001

Category/
Type

Candidate Name

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				2	6				2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : B-82

Amount of Each Disbursement this Period

[REDACTED] 309.54

Memo Item

Full Name (Last, First, Middle Initial)

B. Chase Card Services

Mailing Address PO Box 6294

City
Carol Stream

State
IL

Zip Code
60197

Purpose of Disbursement

Credit Card Payment - See Memo if Itemized

001

Category/
Type

Candidate Name

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				2	6				2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : B-80

Amount of Each Disbursement this Period

[REDACTED] 250.00

Memo Item

Full Name (Last, First, Middle Initial)

C. InCorp

Mailing Address 3773 Howard Hughes Parkway
STE 500S

City
Las Vegas

State
NV

Zip Code
89119

Purpose of Disbursement

Registered Agent

001

Category/
Type

Candidate Name

Office Sought:

 House
 Senate
 President

Disbursement For:

 Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				2	6				2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : B-81

Amount of Each Disbursement this Period

[REDACTED] 250.00

Memo Item MEMO: Subvendor of-Chase Card Services

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

[REDACTED] 559.54

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)

Community Change Voters

Full Name (Last, First, Middle Initial)

A. CommonCentsConsulting, LLC

Mailing Address PO Box 26430

City
Tempe

State
AZ

Zip Code
85285

Purpose of Disbursement
Compliance & Accounting Services

001

Category/
Type

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	2		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : B-84

Amount of Each Disbursement this Period

[REDACTED] 2250.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CommonCentsConsulting, LLC

Mailing Address PO Box 26430

City
Tempe

State
AZ

Zip Code
85285

Purpose of Disbursement
Compliance & Accounting Services

001

Category/
Type

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	2		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : B-85

Amount of Each Disbursement this Period

[REDACTED] 275.00

Memo Item

Full Name (Last, First, Middle Initial)

C. CommonCentsConsulting, LLC

Mailing Address PO Box 26430

City
Tempe

State
AZ

Zip Code
85285

Purpose of Disbursement
Compliance & Accounting Services

001

Category/
Type

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	2		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : B-86

Amount of Each Disbursement this Period

[REDACTED] 275.00

Memo Item

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

[REDACTED] 2800.00

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)

Community Change Voters

Full Name (Last, First, Middle Initial)

A. Amalgamated Bank

Mailing Address 275 7th Avenue

City
New York

State
NY

Zip Code
10001

Purpose of Disbursement

Bank Fee

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

State: _____ District: _____

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 25 / 2023

FEC Identification Number

C [REDACTED]

Transaction ID : B-88

Amount of Each Disbursement this Period

[REDACTED] 288.72

Memo Item

Full Name (Last, First, Middle Initial)

B. CommonCentsConsulting, LLC

Mailing Address PO Box 26430

City
Tempe

State
AZ

Zip Code
85285

Purpose of Disbursement

Compliance & Accounting Services

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

State: _____ District: _____

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 07 / 2023

FEC Identification Number

C [REDACTED]

Transaction ID : B-90

Amount of Each Disbursement this Period

[REDACTED] 2250.00

Memo Item

Full Name (Last, First, Middle Initial)

C. CommonCentsConsulting, LLC

Mailing Address PO Box 26430

City
Tempe

State
AZ

Zip Code
85285

Purpose of Disbursement

Compliance & Accounting Services

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

State: _____ District: _____

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 07 / 2023

FEC Identification Number

C [REDACTED]

Transaction ID : B-91

Amount of Each Disbursement this Period

[REDACTED] 275.00

Memo Item

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

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

[REDACTED] 2813.72

[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)

Community Change Voters

Full Name (Last, First, Middle Initial)

A. CommonCentsConsulting, LLC

Mailing Address PO Box 26430

City
Tempe

State
AZ

Zip Code
85285

Purpose of Disbursement
Compliance & Accounting Services

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : B-92

Amount of Each Disbursement this Period

[REDACTED] 275.00

Memo Item

Full Name (Last, First, Middle Initial)

B. EveryAction, Inc.

Mailing Address 655 15th Street Northwest
STE 650

City
Washington

State
DC

Zip Code
20005

Purpose of Disbursement
Compliance Disclosure Software

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	8		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : B-93

Amount of Each Disbursement this Period

[REDACTED] 350.43

Memo Item

Full Name (Last, First, Middle Initial)

C. Amalgamated Bank

Mailing Address 275 7th Avenue

City
New York

State
NY

Zip Code
10001

Purpose of Disbursement
Bank Fee

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	7		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : B-95

Amount of Each Disbursement this Period

[REDACTED] 304.04

Memo Item

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

[REDACTED] 929.47

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)

Community Change Voters

Full Name (Last, First, Middle Initial)

A. CommonCentsConsulting, LLC

Mailing Address PO Box 26430

City
Tempe

State
AZ

Zip Code
85285

Purpose of Disbursement
Compliance & Accounting Services

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : B-97

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. CommonCentsConsulting, LLC

Mailing Address PO Box 26430

City
Tempe

State
AZ

Zip Code
85285

Purpose of Disbursement
Compliance & Accounting Services

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : B-98

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. CommonCentsConsulting, LLC

Mailing Address PO Box 26430

City
Tempe

State
AZ

Zip Code
85285

Purpose of Disbursement
Compliance & Accounting Services

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : B-99

Amount of Each Disbursement this Period

Memo Item

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

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Community Change Voters

Full Name (Last, First, Middle Initial)

A. Amalgamated Bank

Mailing Address 275 7th Avenue

City
New York

State
NY

Zip Code
10001

Purpose of Disbursement

Bank Fee

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

State: _____ District: _____

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 27 / 2023

FEC Identification Number

C [REDACTED]

Transaction ID : B-100

Amount of Each Disbursement this Period

[REDACTED] 254.45

Memo Item

Full Name (Last, First, Middle Initial)

B. CommonCentsConsulting, LLC

Mailing Address PO Box 26430

City
Tempe

State
AZ

Zip Code
85285

Purpose of Disbursement

Compliance & Accounting Services

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

State: _____ District: _____

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 07 / 2023

FEC Identification Number

C [REDACTED]

Transaction ID : B-102

Amount of Each Disbursement this Period

[REDACTED] 2250.00

Memo Item

Full Name (Last, First, Middle Initial)

C. CommonCentsConsulting, LLC

Mailing Address PO Box 26430

City
Tempe

State
AZ

Zip Code
85285

Purpose of Disbursement

Compliance & Accounting Services

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

State: _____ District: _____

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 07 / 2023

FEC Identification Number

C [REDACTED]

Transaction ID : B-103

Amount of Each Disbursement this Period

[REDACTED] 275.00

Memo Item

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

[REDACTED] 2779.45

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)

Community Change Voters

Full Name (Last, First, Middle Initial)

A. CommonCentsConsulting, LLC

Mailing Address PO Box 26430

City
Tempe

State
AZ

Zip Code
85285

Purpose of Disbursement
Compliance & Accounting Services

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 07 / 2023

FEC Identification Number

C

Transaction ID : B-104

Amount of Each Disbursement this Period

275.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Integrated Solutions: Political

Mailing Address 4142 Adams Avenue
Suite 103-550

City
San Diego

State
CA

Zip Code
92116

Purpose of Disbursement
Compliance & Reporting Software Subscription

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 17 / 2023

FEC Identification Number

C

Transaction ID : B-105

Amount of Each Disbursement this Period

2967.74

Memo Item

Full Name (Last, First, Middle Initial)

C. Amalgamated Bank

Mailing Address 275 7th Avenue

City
New York

State
NY

Zip Code
10001

Purpose of Disbursement
Bank Fee

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 29 / 2023

FEC Identification Number

C

Transaction ID : B-106

Amount of Each Disbursement this Period

248.64

Memo Item

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

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

3491.38

**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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Mailing Address PO Box 26430

City
Tempe

State
AZ

Zip Code
85285

Purpose of Disbursement
Compliance & Accounting Services

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			29			2023			

FEC Identification Number

C [REDACTED]

Transaction ID : B-108

Amount of Each Disbursement this Period

[REDACTED] 2250.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CommonCentsConsulting, LLC

Mailing Address PO Box 26430

City
Tempe

State
AZ

Zip Code
85285

Purpose of Disbursement
Compliance & Accounting Services

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			29			2023			

FEC Identification Number

C [REDACTED]

Transaction ID : B-109

Amount of Each Disbursement this Period

[REDACTED] 275.00

Memo Item

Full Name (Last, First, Middle Initial)

C. CommonCentsConsulting, LLC

Mailing Address PO Box 26430

City
Tempe

State
AZ

Zip Code
85285

Purpose of Disbursement
Compliance & Accounting Services

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			29			2023			

FEC Identification Number

C [REDACTED]

Transaction ID : B-110

Amount of Each Disbursement this Period

[REDACTED] 275.00

Memo Item

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

[REDACTED] 2800.00

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

[REDACTED]

