

# FEC FORM 5

## REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation <b>People's Action</b>			3. FEC Identification Number <b>C</b> C90016833
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 2125 W North Ave			
(c) City, State and ZIP Code Chicago IL 60647			
2. Occupation and Name of Employer (for Individual Filers Only)			

4. TYPE OF REPORT (check appropriate boxes):

- (a)  April 15 Quarterly Report
- July 15 Quarterly Report  24-Hour Report
- October 15 Quarterly Report  48-Hour Report
- January 31 Year-End Report

b) Is this Report an amendment?  No  Yes, it amends the report filed on

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

5. COVERING PERIOD:

FROM	M M M	/	D D D	/	Y Y Y Y Y Y
	02		10		2020
THROUGH	M M M	/	D D D	/	Y Y Y Y Y Y
	02		11		2020

6. TOTAL CONTRIBUTIONS.....	0.00
7. TOTAL INDEPENDENT EXPENDITURES .....	46229.08

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 any political party committee or its agent.

<b>TYPE OR PRINT NAME OF PERSON COMPLETING FORM</b>	<b>SIGNATURE</b>	<b>DATE</b>
Bradach, James, , ,	<i>Bradach, James, , ,</i>	02/12/2020
	<i>[Electronically Filed]</i>	

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

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
People's Action

Full Name (Last, First, Middle Initial) of Payee AmTrav		Date of Public Distribution/Dissemination 02 / 11 / 2020	
Mailing Address 1021 W Adams St Ste # 300		Amount 9715.58	
City Chicago	State IL	Zip Code 60607-2937	Transaction ID : 500029814
Purpose of Expenditure Staff Travel (Estimate)	Category/Type 002	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: VT District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: SANDERS, BERNARD, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 90711.40		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Bus for Progress		Date of Public Distribution/Dissemination 02 / 11 / 2020	
Mailing Address 1201 Evergreen Ave		Amount 560.00	
City Ocean	State NJ	Zip Code 07712-4516	Transaction ID : 500029811
Purpose of Expenditure Transportation	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: VT District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: SANDERS, BERNARD, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 90711.40		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Everyday People		Date of Public Distribution/Dissemination 02 / 11 / 2020	
Mailing Address 1042 Grant Ave Ste 5		Amount 7000.00	
City San Francisco	State CA	Zip Code 94133-5025	Transaction ID : 500029807
Purpose of Expenditure Contribution to affiliated organization	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: VT District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: SANDERS, BERNARD, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 90711.40		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	17275.58
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
People's Action

Full Name (Last, First, Middle Initial) of Payee Ground Game LA		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 11 / 2020	
Mailing Address 5617 Hollywood Blvd Ste 107		Amount 7000.00	
City Los Angeles	State CA	Zip Code 90028-6889	Transaction ID : 500029806
Purpose of Expenditure Contribution to affiliated organization	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: VT District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: SANDERS, BERNARD, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hae Now Organic Tees		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 11 / 2020	
Mailing Address 654 Alfred Nobel Dr		Amount 953.50	
City Hercules	State CA	Zip Code 94547-1834	Transaction ID : 500029815
Purpose of Expenditure T-shirt printing	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: VT District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: SANDERS, BERNARD, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Michigan People's Campaign		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 11 / 2020	
Mailing Address 4405 Wesson St		Amount 7000.00	
City Detroit	State MI	Zip Code 48210-2416	Transaction ID : 500029809
Purpose of Expenditure Contribution to affiliated organization.	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: VT District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: SANDERS, BERNARD, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	14953.50
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
People's Action

Full Name (Last, First, Middle Initial) of Payee ONE People's Campaign		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 11 / 2020	
Mailing Address 4648 N Racine Ave		Amount 7000.00	
City Chicago	State IL	Zip Code 60640-4906	Transaction ID : 500029810
Purpose of Expenditure Contribution to affiliated organization.	Category/Type	Office Sought: <input type="checkbox"/> House State: VT <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: SANDERS, BERNARD, , ,		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought		90711.40	

Full Name (Last, First, Middle Initial) of Payee Reclaim Chicago		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 11 / 2020	
Mailing Address 1659 W Hubbard St		Amount 7000.00	
City Chicago	State IL	Zip Code 60622-6352	Transaction ID : 500029808
Purpose of Expenditure Contribution to affiliated organization	Category/Type	Office Sought: <input type="checkbox"/> House State: VT <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: SANDERS, BERNARD, , ,		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought		90711.40	

Full Name (Last, First, Middle Initial) of Payee		Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address		Amount	
City	State	Zip Code	
Purpose of Expenditure	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought			

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	14000.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures..... (carry total from last page forward to Line 7)	46229.08