

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

ONE VOTE AT A TIME

ADDRESS (number and street) P.O. BOX 39528

Check if different than previously reported. (ACC) LOS ANGELES CA 90039

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

C C00627158

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 checked="" 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 / 2020 through M M / D D / Y Y Y Y Y Y 07 / 31 / 2020

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

Ullman, Sarah, , ,

Type or Print Name of Treasurer

Signature of Treasurer Ullman, Sarah, , , [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 08 / 20 / 2020

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)

Page 2

Write or Type Committee Name

ONE VOTE AT A TIME

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="2020"/>	<input type="text" value="28324.24"/>	<input type="text" value="28324.24"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="76277.19"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="124752.08"/>	<input type="text" value="647273.30"/>
(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="201029.27"/>	<input type="text" value="675597.54"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="67365.57"/>	<input type="text" value="541933.84"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="133663.70"/>	<input type="text" value="133663.70"/>
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:

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
ONE VOTE AT A TIME

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).....	114700.00	629640.00
(ii) Unitemized	1550.00	9078.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	116250.00	638718.00
(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)	116250.00	638718.00
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).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	8502.08	8555.30
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)).....▶	124752.08	647273.30
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	124752.08	647273.30

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	67365.57	541933.84
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	67365.57	541933.84
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	0.00
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)) ..	67365.57	541933.84
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	67365.57	541933.84

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	116250.00	638718.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	116250.00	638718.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	67365.57	541933.84
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	67365.57	541933.84

**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 23
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<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)
ONE VOTE AT A TIME

A. Blume, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23 Vicente
 City Berkeley State CA Zip Code 94705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blume Capital Occupation (for Individual) Inv.adv.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 14 / 2020
Transaction ID : SA11AI.5725
 Amount of Each Receipt this Period 250.00
 Memo Item
 Earmarked Contribution: See Below

B. ACTBLUE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 441146
 City SOMERVILLE State MA Zip Code 02144
 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 ▼ 23683.00

Date of Receipt 07 / 14 / 2020
Transaction ID : SA11AI.5725.0
 Amount of Each Receipt this Period 250.00
 Memo Item
 Total earmarked through conduit. Contribution limit not affected.

C. Blume, Zach, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23 Vicente Road
 City Berkeley State CA Zip Code 94705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Portal A Occupation (for Individual) Partner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 01 / 2020
Transaction ID : SA11AI.5675
 Amount of Each Receipt this Period 250.00
 Memo Item
 Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 23
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
ONE VOTE AT A TIME

A. ACTBLUE

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

Mailing Address P.O. BOX 441146

City SOMERVILLE	State MA	Zip Code 02144
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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 ▼
19733.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2020

Transaction ID : SA11AI.5675.0

Amount of Each Receipt this Period
250.00

Memo Item
Total earmarked through conduit. Contribution limit not affected.

B. Coleman, Ellen, , ,

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

Mailing Address 685 West End Avenue

City New York	State NY	Zip Code 10025
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)
MK&A Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 02 / 2020

Transaction ID : SA11AI.5697

Amount of Each Receipt this Period
250.00

Memo Item
Earmarked Contribution: See Below

C. ACTBLUE

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

Mailing Address P.O. BOX 441146

City SOMERVILLE	State MA	Zip Code 02144
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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 ▼
21758.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 02 / 2020

Transaction ID : SA11AI.5697.0

Amount of Each Receipt this Period
250.00

Memo Item
Total earmarked through conduit. Contribution limit not affected.

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 23
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
ONE VOTE AT A TIME

A. Conway Family Trust

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

Mailing Address 425 Belvedere Avenue

City SAN FRANCISCO	State CA	Zip Code 94103
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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 ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 14 / 2020

Transaction ID : SA11AI.5636

Amount of Each Receipt this Period
5000.00

Memo Item

B. Duboc, Frederic, , ,

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

Mailing Address 5500 Pemberton Drive

City Greenwood Vg	State CO	Zip Code 80121
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)
Not Employed Not Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2020

Transaction ID : SA11AI.5660

Amount of Each Receipt this Period
1000.00

Memo Item

Earmarked Contribution: See Below

C. ACTBLUE

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

Mailing Address P.O. BOX 441146

City SOMERVILLE	State MA	Zip Code 02144
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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 ▼
19308.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2020

Transaction ID : SA11AI.5660.0

Amount of Each Receipt this Period
1000.00

Memo Item

Total earmarked through conduit. Contribution limit not affected.

SUBTOTAL of Receipts This Page (optional).....	6000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
ONE VOTE AT A TIME

A. Emeott, Brian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 124 Forest Side Avenue
 City San Francisco State CA Zip Code 94127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Lyft Occupation (for Individual) Director Privacy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 29 / 2020
Transaction ID : SA11AI.5740
 Amount of Each Receipt this Period 200.00
 Memo Item
 Earmarked Contribution: See Below

B. ACTBLUE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 441146
 City SOMERVILLE State MA Zip Code 02144
 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 ▼ 25658.00

Date of Receipt 07 / 29 / 2020
Transaction ID : SA11AI.5740.0
 Amount of Each Receipt this Period 200.00
 Memo Item
 Total earmarked through conduit. Contribution limit not affected.

C. Fohner, Benjamin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 950 Hoxett St
 City Gilroy State CA Zip Code 95020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Google Occupation (for Individual) Product Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 01 / 2020
Transaction ID : SA11AI.5644
 Amount of Each Receipt this Period 250.00
 Memo Item
 Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
ONE VOTE AT A TIME

A. ACTBLUE

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

Mailing Address P.O. BOX 441146

City SOMERVILLE	State MA	Zip Code 02144
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
17808.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2020

Transaction ID : SA11AI.5644.0

Amount of Each Receipt this Period
250.00

Memo Item
 Total earmarked through conduit. Contribution limit not affected.

B. Fraga, David, , ,

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

Mailing Address 2 N 6TH PL

City BROOKLYN	State NY	Zip Code 11249
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 06 / 2020

Transaction ID : SA11AI.5711

Amount of Each Receipt this Period
1000.00

Memo Item
 Earmarked Contribution: See Below

C. ACTBLUE

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

Mailing Address P.O. BOX 441146

City SOMERVILLE	State MA	Zip Code 02144
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
23083.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 06 / 2020

Transaction ID : SA11AI.5711.0

Amount of Each Receipt this Period
1000.00

Memo Item
 Total earmarked through conduit. Contribution limit not affected.

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 OF 23
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
ONE VOTE AT A TIME

A. Hickey, Douglas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 140 seacliff ave
 City san francisco State CA Zip Code 94121
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) binwise Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 16 / 2020
Transaction ID : SA11AI.5731
 Amount of Each Receipt this Period 1000.00
 Memo Item
 Earmarked Contribution: See Below

B. ACTBLUE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 441146
 City SOMERVILLE State MA Zip Code 02144
 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 ▼ 24933.00

Date of Receipt 07 / 16 / 2020
Transaction ID : SA11AI.5731.0
 Amount of Each Receipt this Period 1000.00
 Memo Item
 Total earmarked through conduit. Contribution limit not affected.

C. Hoffman, Jascha, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 438 12th St
 City Brooklyn State NY Zip Code 11215
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) self Occupation (for Individual) teacher
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 01 / 2020
Transaction ID : SA11AI.5686
 Amount of Each Receipt this Period 500.00
 Memo Item
 Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 23
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
ONE VOTE AT A TIME

A. ACTBLUE

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

Mailing Address P.O. BOX 441146

City SOMERVILLE	State MA	Zip Code 02144
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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 ▼
20433.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2020

Transaction ID : SA11AI.5686.0

Amount of Each Receipt this Period
500.00

Memo Item
Total earmarked through conduit. Contribution limit not affected.

B. Hoffman, Jascha, , ,

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

Mailing Address 438 12th St

City Brooklyn	State NY	Zip Code 11215
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		13		2020

Transaction ID : SA11AI.5723

Amount of Each Receipt this Period
250.00

Memo Item
Earmarked Contribution: See Below

C. ACTBLUE

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

Mailing Address P.O. BOX 441146

City SOMERVILLE	State MA	Zip Code 02144
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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 ▼
23433.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		13		2020

Transaction ID : SA11AI.5723.0

Amount of Each Receipt this Period
250.00

Memo Item
Total earmarked through conduit. Contribution limit not affected.

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 23
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
ONE VOTE AT A TIME

A. Kiernan, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 915 W Peachtree St Unit 525
 City Atlanta State GA Zip Code 30309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Cox Communications Occupation (for Individual) Head of Growth Management Cox2M
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 01 / 2020
Transaction ID : SA11AI.5648
 Amount of Each Receipt this Period 250.00
 Memo Item
 Earmarked Contribution: See Below

B. ACTBLUE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 441146
 City SOMERVILLE State MA Zip Code 02144
 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 ▼ 18058.00

Date of Receipt 07 / 01 / 2020
Transaction ID : SA11AI.5648.0
 Amount of Each Receipt this Period 250.00
 Memo Item
 Total earmarked through conduit. Contribution limit not affected.

C. Mehta, Nimay, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 252 7th Avenue
 City New York State NY Zip Code 10001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Lead Edge Occupation (for Individual) Partner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 01 / 2020
Transaction ID : SA11AI.5692
 Amount of Each Receipt this Period 1000.00
 Memo Item
 Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....▶	1250.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 23
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
ONE VOTE AT A TIME

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

Mailing Address P.O. BOX 441146

City SOMERVILLE	State MA	Zip Code 02144
--------------------	-------------	-------------------

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 ▼
21458.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2020

Transaction ID : SA11AI.5692.0

Amount of Each Receipt this Period
1000.00

Memo Item
Total earmarked through conduit. Contribution limit not affected.

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

Mailing Address 428 Roblar Avenue

City Hillsborough	State CA	Zip Code 94010
----------------------	-------------	-------------------

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

Name of Employer (for Individual) Not employed	Occupation (for Individual) Not employed
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		17		2020

Transaction ID : SA11AI.5737

Amount of Each Receipt this Period
500.00

Memo Item
Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 441146

City SOMERVILLE	State MA	Zip Code 02144
--------------------	-------------	-------------------

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 ▼
25458.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		17		2020

Transaction ID : SA11AI.5737.0

Amount of Each Receipt this Period
500.00

Memo Item
Total earmarked through conduit. Contribution limit not affected.

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 15 OF 23
(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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
ONE VOTE AT A TIME

A. Silverman, Michael, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 183 Columbia Hts

City Brooklyn	State NY	Zip Code 11201
------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
07 / 30 / 2020

Transaction ID : SA11AI.5749

Amount of Each Receipt this Period
250.00

Memo Item
Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 441146

City SOMERVILLE	State MA	Zip Code 02144
--------------------	-------------	-------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
26108.00

Date of Receipt
MM / DD / YYYY
07 / 30 / 2020

Transaction ID : SA11AI.5749.0

Amount of Each Receipt this Period
250.00

Memo Item
Total earmarked through conduit. Contribution limit not affected.

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

Mailing Address 121 Mira Way

City Portola Valley	State CA	Zip Code 94028
------------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
07 / 01 / 2020

Transaction ID : SA11AI.5638

Amount of Each Receipt this Period
2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	2750.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 16 OF 23
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
ONE VOTE AT A TIME

A. ACTBLUE

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

Mailing Address P.O. BOX 441146

City SOMERVILLE	State MA	Zip Code 02144
--------------------	-------------	-------------------

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 ▼
17458.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2020

Transaction ID : SA11AI.5638.0

Amount of Each Receipt this Period
2500.00

Memo Item
 Total earmarked through conduit. Contribution limit not affected.

B. van hoven, mathew, , ,

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

Mailing Address 1041 Nunnery Lane

City Nashville	State TN	Zip Code 37221
-------------------	-------------	-------------------

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

Name of Employer (for Individual) Self employed	Occupation (for Individual) Public Relations
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 14 / 2020

Transaction ID : SA11AI.5728

Amount of Each Receipt this Period
250.00

Memo Item
 Earmarked Contribution: See Below

C. ACTBLUE

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

Mailing Address P.O. BOX 441146

City SOMERVILLE	State MA	Zip Code 02144
--------------------	-------------	-------------------

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 ▼
23933.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 14 / 2020

Transaction ID : SA11AI.5728.0

Amount of Each Receipt this Period
250.00

Memo Item
 Total earmarked through conduit. Contribution limit not affected.

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 17 OF 23
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
ONE VOTE AT A TIME

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Whedon, Joss, , ,

Mailing Address P.O. Box 988

City Malibu	State CA	Zip Code 90265
----------------	-------------	-------------------

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

Name of Employer (for Individual) Self-Employed	Occupation (for Individual) Screenwriter
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
488710.00

Date of Receipt
MM / DD / YYYY
07 / 24 / 2020

Transaction ID : SA11AI.5626

Amount of Each Receipt this Period
100000.00

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
MM / DD / YYYY

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
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	100000.00
TOTAL This Period (last page this line number only).....	114700.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 OF 23
(check only one)

<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)
ONE VOTE AT A TIME

A. BRADY PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 918 PENNSYLVANIA AVE SE

City WASHINGTON	State DC	Zip Code 20003
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00674093

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
8501.33

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 16 / 2020

Transaction ID : SA17.5630

Amount of Each Receipt this Period
8501.33

Memo Item
Video Production Services

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 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 Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	8501.33
TOTAL This Period (last page this line number only).....	8501.33

**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)
ONE VOTE AT A TIME

Full Name (Last, First, Middle Initial)

A. ACTBLUE

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 02144

Purpose of Disbursement
Processing Fees

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
07 / 03 / 2020

FEC Identification Number

Transaction ID : SB21B.5634
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. ACTBLUE

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 02144

Purpose of Disbursement
Processing Fees

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
07 / 05 / 2020

FEC Identification Number

Transaction ID : SB21B.5756
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. ACTBLUE

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 02144

Purpose of Disbursement
Processing Fees

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
07 / 12 / 2020

FEC Identification Number

Transaction ID : SB21B.5757
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)
ONE VOTE AT A TIME

A. ACTBLUE

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 02144

Purpose of Disbursement Processing Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 19 / 2020

FEC Identification Number: C

Transaction ID : SB21B.5758

Amount of Each Disbursement this Period: 89.88

Memo Item

B. ACTBLUE

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 02144

Purpose of Disbursement Processing Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 31 / 2020

FEC Identification Number: C

Transaction ID : SB21B.5759

Amount of Each Disbursement this Period: 29.63

Memo Item

C. BENCOSME, MELANIE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 58-51 78th Avenue

City Ridgewood State NY Zip Code 11217

Purpose of Disbursement Media Production

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 06 / 2020

FEC Identification Number: C

Transaction ID : SB21B.5761

Amount of Each Disbursement this Period: 600.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 719.51

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)
ONE VOTE AT A TIME

Full Name (Last, First, Middle Initial) A. BENCOSME, MELANIE, , ,		Date of Disbursement MM / DD / YYYY 07 / 22 / 2020	
Mailing Address 58-51 78th Avenue		FEC Identification Number C [REDACTED] Transaction ID : SB21B.5760 Amount of Each Disbursement this Period [REDACTED] 600.00	
City Ridgewood	State NY	Zip Code 11217	Category/ Type 001
Purpose of Disbursement Media Production			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Master Plan Productions		Date of Disbursement MM / DD / YYYY 07 / 27 / 2020	
Mailing Address P.O. Box 39528		FEC Identification Number C [REDACTED] Transaction ID : SB21B.5627 Amount of Each Disbursement this Period [REDACTED] 52000.00	
City Los Angeles	State CA	Zip Code 90039	Category/ Type 001
Purpose of Disbursement Media Strategy Consulting			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Morgan Stanley		Date of Disbursement MM / DD / YYYY 07 / 27 / 2020	
Mailing Address 1585 Broadway		FEC Identification Number C [REDACTED] Transaction ID : SB21B.5625 Amount of Each Disbursement this Period [REDACTED] 25.00	
City New York	State NY	Zip Code 10036	Category/ Type 001
Purpose of Disbursement Bank Fee			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

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

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

[REDACTED] 52625.00
[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)
ONE VOTE AT A TIME

A. Roller, Emma, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 44A 9th Street

City San Francisco State CA Zip Code 94103

Purpose of Disbursement Media Production

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 22 / 2020

FEC Identification Number: C

Transaction ID : **SB21B.5763**

Amount of Each Disbursement this Period: 1800.00

Memo Item

B. Venable LLP

Full Name (Last, First, Middle Initial)

Mailing Address 600 Massachusetts Avenue, NW

City Washington State DC Zip Code 20001

Purpose of Disbursement Legal Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 27 / 2020

FEC Identification Number: C

Transaction ID : **SB21B.5755**

Amount of Each Disbursement this Period: 656.10

Memo Item

C. Wilson, Pierce, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 44A 9th Street

City San Francisco State CA Zip Code 94103

Purpose of Disbursement Media Production

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 06 / 2020

FEC Identification Number: C

Transaction ID : **SB21B.5768**

Amount of Each Disbursement this Period: 1200.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3656.10

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)
ONE VOTE AT A TIME

A. Wilson, Pierce, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 44A 9th Street

City San Francisco State CA Zip Code 94103

Purpose of Disbursement Media Production

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 16 / 2020

FEC Identification Number: C

Transaction ID : SB21B.5766

Amount of Each Disbursement this Period: 10040.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	10040.00
TOTAL This Period (last page this line number only).....▶	67365.57