

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

Build the Wave

ADDRESS (number and street) 249 Melrose St

Check if different than previously reported. (ACC) Brooklyn NY 11206

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

C C00667667

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 / 2021 through M M / D D / Y Y Y Y Y Y 12 / 31 / 2021

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

Lerner, Nathan, , ,

Type or Print Name of Treasurer _____

Signature of Treasurer Lerner, Nathan, , , [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 01 / 31 / 2022

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

Build the Wave

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="2021"/>	<input type="text" value="29978.82"/>	<input type="text" value="29978.82"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="58464.59"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="5106.00"/>	<input type="text" value="42130.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="63570.59"/>	<input type="text" value="72108.82"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="10106.11"/>	<input type="text" value="18644.34"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="53464.48"/>	<input type="text" value="53464.48"/>
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

Build the Wave

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).....	4710.00	39810.00
(ii) Unitemized	396.00	2320.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	5106.00	42130.00
(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)	5106.00	42130.00
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.).....	0.00	0.00
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)).....▶	5106.00	42130.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	5106.00	42130.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	10106.11	18644.34
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	10106.11	18644.34
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)) ..	10106.11	18644.34
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10106.11	18644.34

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)	5106.00	42130.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5106.00	42130.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

**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 6 OF 47
	<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	

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)
Build the Wave

A. Hunt, Donna, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 520 Palm Ave
 City Penngrove State CA Zip Code 94951
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Financial Planner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 09 / 2021
Transaction ID : CDR-000000000381209
 Amount of Each Receipt this Period 25.00
 Memo Item

B. ACTBLUE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 441146
 City West Somerville State MA Zip Code 02144-0031
 FEC ID number of contributing federal political committee. **C** C00401224
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 07 / 09 / 2021
Transaction ID : CDABR-000000000381209
 Amount of Each Receipt this Period 25.00
 Memo Item
 Above Contribution earmarked through this organization.

C. Hunt, Donna, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 520 Palm Ave
 City Penngrove State CA Zip Code 94951
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Financial Planner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 09 / 2021
Transaction ID : CDR-000000000387955
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 50.00
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 47
<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)
Build the Wave

A. ACTBLUE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401224

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
MM / DD / YYYY
08 / 09 / 2021
Transaction ID : CDABR-00000000387955

Amount of Each Receipt this Period
25.00

Memo Item

Above Contribution earmarked through this organization.

B. Hunt, Donna, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 520 Palm Ave

City Penngrove	State CA	Zip Code 94951
-------------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)
Self Financial Planner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
09 / 09 / 2021
Transaction ID : CDR-000000000393984

Amount of Each Receipt this Period
25.00

Memo Item

C. ACTBLUE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
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FEC ID number of contributing federal political committee. **C** C00401224

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
0.00

Date of Receipt
MM / DD / YYYY
09 / 09 / 2021
Transaction ID : CDABR-00000000393984

Amount of Each Receipt this Period
25.00

Memo Item

Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....	25.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 OF 47
	(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)
Build the Wave

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

Mailing Address 520 Palm Ave

City Penngrove	State CA	Zip Code 94951
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self	Occupation (for Individual) Financial Planner
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2021

Transaction ID : CDR-000000000403800

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401224

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2021

Transaction ID : CDABR-000000000403800

Amount of Each Receipt this Period
25.00

Memo Item

Above Contribution earmarked through this organization.

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

Mailing Address 520 Palm Ave

City Penngrove	State CA	Zip Code 94951
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self	Occupation (for Individual) Financial Planner
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		09		2021

Transaction ID : CDR-000000000554147

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	50.00
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 9 OF 47
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Build the Wave

A. ACTBLUE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 441146
 City West Somerville State MA Zip Code 02144-0031
 FEC ID number of contributing federal political committee. **C** C00401224
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 11 / 09 / 2021
Transaction ID : CDABR-00000000554147
 Amount of Each Receipt this Period 25.00
 Memo Item
 Above Contribution earmarked through this organization.

B. Hunt, Donna, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 520 Palm Ave
 City Penngrove State CA Zip Code 94951
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Financial Planner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 09 / 2021
Transaction ID : CDR-000000000568669
 Amount of Each Receipt this Period 25.00
 Memo Item

C. ACTBLUE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 441146
 City West Somerville State MA Zip Code 02144-0031
 FEC ID number of contributing federal political committee. **C** C00401224
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 12 / 09 / 2021
Transaction ID : CDABR-00000000568669
 Amount of Each Receipt this Period 25.00
 Memo Item
 Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....▶ 25.00
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 10 OF 47 (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)
Build the Wave

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

Mailing Address 3118 Oak Ridge Dr

City Horseshoe Bay	State TX	Zip Code 78657
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) Allied Consulting, Inc.	Occupation (for Individual) IT Business Consultant
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	09	/	2021

Transaction ID : CDR-000000000554146

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
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FEC ID number of contributing federal political committee. **C** C00401224

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	09	/	2021

Transaction ID : CDABR-000000000554146

Amount of Each Receipt this Period
25.00

Memo Item

Above Contribution earmarked through this organization.

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

Mailing Address 3118 Oak Ridge Dr

City Horseshoe Bay	State TX	Zip Code 78657
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Allied Consulting, Inc.	Occupation (for Individual) IT Business Consultant
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10	/	09	/	2021

Transaction ID : CDR-000000000403799

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	50.00
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 11 OF 47
	<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)
Build the Wave

A. ACTBLUE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
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FEC ID number of contributing federal political committee. **C** C00401224

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2021

Transaction ID : CDABR-00000000403799

Amount of Each Receipt this Period
25.00

Memo Item

Above Contribution earmarked through this organization.

B. elliott, patricia, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3118 Oak Ridge Dr

City Horseshoe Bay	State TX	Zip Code 78657
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)
Allied Consulting, Inc. IT Business Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		09		2021

Transaction ID : CDR-000000000568668

Amount of Each Receipt this Period
25.00

Memo Item

C. ACTBLUE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401224

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
0.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		09		2021

Transaction ID : CDABR-00000000568668

Amount of Each Receipt this Period
25.00

Memo Item

Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....	25.00
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 47
	<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)
Build the Wave

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

Mailing Address 3118 Oak Ridge Dr

City Horseshoe Bay	State TX	Zip Code 78657
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) Allied Consulting, Inc.	Occupation (for Individual) IT Business Consultant
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2021

Transaction ID : CDR-000000000393983

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401224

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2021

Transaction ID : CDABR-000000000393983

Amount of Each Receipt this Period
25.00

Memo Item

Above Contribution earmarked through this organization.

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

Mailing Address 3118 Oak Ridge Dr

City Horseshoe Bay	State TX	Zip Code 78657
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) Allied Consulting, Inc.	Occupation (for Individual) IT Business Consultant
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2021

Transaction ID : CDR-000000000387954

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	50.00
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 47
	<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	

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)
Build the Wave

A. ACTBLUE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401224

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
MM / DD / YYYY
08 / 09 / 2021
Transaction ID : CDABR-00000000387954

Amount of Each Receipt this Period
25.00

Memo Item

Above Contribution earmarked through this organization.

B. elliott, patricia, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3118 Oak Ridge Dr

City Horseshoe Bay	State TX	Zip Code 78657
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)
Allied Consulting, Inc. IT Business Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
07 / 09 / 2021
Transaction ID : CDR-000000000381208

Amount of Each Receipt this Period
25.00

Memo Item

C. ACTBLUE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401224

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
0.00

Date of Receipt
MM / DD / YYYY
07 / 09 / 2021
Transaction ID : CDABR-00000000381208

Amount of Each Receipt this Period
25.00

Memo Item

Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....	25.00
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 47
	<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	

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)
Build the Wave

A. Johnson, Elise, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1707 Parkside Ave
 City San Jose State CA Zip Code 95125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) West Valley Community College Occupation (for Individual) Counselor/Faculty
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt 07 / 09 / 2021
Transaction ID : CDR-000000000381207
 Amount of Each Receipt this Period 25.00
 Memo Item

B. ACTBLUE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 441146
 City West Somerville State MA Zip Code 02144-0031
 FEC ID number of contributing federal political committee. **C** C00401224
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 07 / 09 / 2021
Transaction ID : CDABR-000000000381207
 Amount of Each Receipt this Period 25.00
 Memo Item
 Above Contribution earmarked through this organization.

C. Johnson, Elise, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1707 Parkside Ave
 City San Jose State CA Zip Code 95125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) West Valley Community College Occupation (for Individual) Counselor/Faculty
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt 08 / 09 / 2021
Transaction ID : CDR-000000000387953
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	50.00
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 15 OF 47
	<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	

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)
Build the Wave

A. ACTBLUE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401224

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2021

Transaction ID : CDABR-00000000387953

Amount of Each Receipt this Period
25.00

Memo Item

Above Contribution earmarked through this organization.

B. Johnson, Elise, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1707 Parkside Ave

City San Jose	State CA	Zip Code 95125
------------------	-------------	-------------------

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

Name of Employer (for Individual) West Valley Community College	Occupation (for Individual) Counselor/Faculty
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
410.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2021

Transaction ID : CDR-000000000393982

Amount of Each Receipt this Period
25.00

Memo Item

C. ACTBLUE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401224

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
0.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2021

Transaction ID : CDABR-00000000393982

Amount of Each Receipt this Period
25.00

Memo Item

Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....	25.00
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 16 OF 47
	<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)
Build the Wave

A. Johnson, Elise, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1707 Parkside Ave
 City San Jose State CA Zip Code 95125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) West Valley Community College Occupation (for Individual) Counselor/Faculty
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt 12 / 09 / 2021
Transaction ID : CDR-000000000568667
 Amount of Each Receipt this Period 25.00
 Memo Item

B. ACTBLUE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 441146
 City West Somerville State MA Zip Code 02144-0031
 FEC ID number of contributing federal political committee. **C** C00401224
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 12 / 09 / 2021
Transaction ID : CDABR-000000000568667
 Amount of Each Receipt this Period 25.00
 Memo Item
 Above Contribution earmarked through this organization.

C. Johnson, Elise, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1707 Parkside Ave
 City San Jose State CA Zip Code 95125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) West Valley Community College Occupation (for Individual) Counselor/Faculty
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt 12 / 10 / 2021
Transaction ID : CDR-000000000568918
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	50.00
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 47
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Build the Wave

A. ACTBLUE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 441146
 City West Somerville State MA Zip Code 02144-0031
 FEC ID number of contributing federal political committee. **C** C00401224
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 12 / 10 / 2021
Transaction ID : CDABR-00000000568918
 Amount of Each Receipt this Period 25.00
 Memo Item
 Above Contribution earmarked through this organization.

B. Johnson, Elise, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1707 Parkside Ave
 City San Jose State CA Zip Code 95125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 West Valley Community College Counselor/Faculty
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt 12 / 15 / 2021
Transaction ID : CDR-000000000570622
 Amount of Each Receipt this Period 20.00
 Memo Item

C. ACTBLUE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 441146
 City West Somerville State MA Zip Code 02144-0031
 FEC ID number of contributing federal political committee. **C** C00401224
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 12 / 15 / 2021
Transaction ID : CDABR-00000000570622
 Amount of Each Receipt this Period 20.00
 Memo Item
 Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....▶ 20.00
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 18 OF 47
	<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)
Build the Wave

A. Johnson, Elise, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1707 Parkside Ave
 City San Jose State CA Zip Code 95125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) West Valley Community College Occupation (for Individual) Counselor/Faculty
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt 11 / 10 / 2021
Transaction ID : CDR-000000000554537
 Amount of Each Receipt this Period 25.00
 Memo Item

B. ACTBLUE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 441146
 City West Somerville State MA Zip Code 02144-0031
 FEC ID number of contributing federal political committee. **C** C00401224
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 11 / 10 / 2021
Transaction ID : CDABR-000000000554537
 Amount of Each Receipt this Period 25.00
 Memo Item
 Above Contribution earmarked through this organization.

C. Johnson, Elise, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1707 Parkside Ave
 City San Jose State CA Zip Code 95125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) West Valley Community College Occupation (for Individual) Counselor/Faculty
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt 11 / 11 / 2021
Transaction ID : CDR-000000000554898
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	50.00
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 19 OF 47
	<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)
Build the Wave

A. ACTBLUE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401224

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	11	/	2021

Transaction ID : CDABR-00000000554898

Amount of Each Receipt this Period
25.00

Memo Item

Above Contribution earmarked through this organization.

B. Johnson, Elise, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1707 Parkside Ave

City San Jose	State CA	Zip Code 95125
------------------	-------------	-------------------

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

Name of Employer (for Individual) West Valley Community College	Occupation (for Individual) Counselor/Faculty
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
410.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	15	/	2021

Transaction ID : CDR-00000000055657

Amount of Each Receipt this Period
20.00

Memo Item

C. ACTBLUE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401224

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
0.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	15	/	2021

Transaction ID : CDABR-00000000556557

Amount of Each Receipt this Period
20.00

Memo Item

Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....	20.00
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 20 OF 47
	(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)
Build the Wave

A. Johnson, Elise, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1707 Parkside Ave
 City San Jose State CA Zip Code 95125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) West Valley Community College Occupation (for Individual) Counselor/Faculty
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt 10 / 10 / 2021
Transaction ID : CDR-000000000403936
 Amount of Each Receipt this Period 25.00
 Memo Item

B. ACTBLUE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 441146
 City West Somerville State MA Zip Code 02144-0031
 FEC ID number of contributing federal political committee. **C** C00401224
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 10 / 10 / 2021
Transaction ID : CDABR-000000000403936
 Amount of Each Receipt this Period 25.00
 Memo Item
 Above Contribution earmarked through this organization.

C. Johnson, Elise, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1707 Parkside Ave
 City San Jose State CA Zip Code 95125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) West Valley Community College Occupation (for Individual) Counselor/Faculty
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt 10 / 15 / 2021
Transaction ID : CDR-000000000510899
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	45.00
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 21 OF 47
	<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)
Build the Wave

A. ACTBLUE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401224

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2021

Transaction ID : CDABR-0000000510899

Amount of Each Receipt this Period
20.00

Memo Item

Above Contribution earmarked through this organization.

B. Chambers, Noel, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 10 Della Dr

City West Babylon	State NY	Zip Code 11704
----------------------	-------------	-------------------

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

Name of Employer (for Individual) Canon	Occupation (for Individual) Business Analyst
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	28	/	2021

Transaction ID : CDR-000000000384471

Amount of Each Receipt this Period
25.00

Memo Item

C. ACTBLUE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401224

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
0.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	28	/	2021

Transaction ID : CDABR-0000000384471

Amount of Each Receipt this Period
25.00

Memo Item

Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....	25.00
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 22 OF 47
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Build the Wave

A. Chambers, Noel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 Della Dr
 City West Babylon State NY Zip Code 11704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Canon Occupation (for Individual) Business Analyst
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 28 / 2021
Transaction ID : CDR-000000000392392
 Amount of Each Receipt this Period 25.00
 Memo Item

B. ACTBLUE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 441146
 City West Somerville State MA Zip Code 02144-0031
 FEC ID number of contributing federal political committee. **C** C00401224
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 08 / 28 / 2021
Transaction ID : CDABR-000000000392392
 Amount of Each Receipt this Period 25.00
 Memo Item
 Above Contribution earmarked through this organization.

C. Chambers, Noel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 Della Dr
 City West Babylon State NY Zip Code 11704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Canon Occupation (for Individual) Business Analyst
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 28 / 2021
Transaction ID : CDR-000000000399005
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 50.00
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 23 OF 47
	<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)
Build the Wave

A. ACTBLUE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401224

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		28		2021

Transaction ID : CDABR-00000000399005

Amount of Each Receipt this Period
25.00

Memo Item

Above Contribution earmarked through this organization.

B. Chambers, Noel, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 10 Della Dr

City West Babylon	State NY	Zip Code 11704
----------------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)
Canon Business Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		28		2021

Transaction ID : CDR-000000000549396

Amount of Each Receipt this Period
25.00

Memo Item

C. ACTBLUE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401224

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
0.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		28		2021

Transaction ID : CDABR-00000000549396

Amount of Each Receipt this Period
25.00

Memo Item

Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....	25.00
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 24 OF 47
	<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)
Build the Wave

A. Chambers, Noel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 Della Dr
 City West Babylon State NY Zip Code 11704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Canon Occupation (for Individual) Business Analyst
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 28 / 2021
Transaction ID : CDR-000000000561501
 Amount of Each Receipt this Period 25.00
 Memo Item

B. ACTBLUE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 441146
 City West Somerville State MA Zip Code 02144-0031
 FEC ID number of contributing federal political committee. **C** C00401224
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 11 / 28 / 2021
Transaction ID : CDABR-000000000561501
 Amount of Each Receipt this Period 25.00
 Memo Item
 Above Contribution earmarked through this organization.

C. Chambers, Noel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 Della Dr
 City West Babylon State NY Zip Code 11704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Canon Occupation (for Individual) Business Analyst
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 28 / 2021
Transaction ID : CDR-000000000576207
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	50.00
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 25 OF 47
	<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)
Build the Wave

A. ACTBLUE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401224

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	28	/	2021

Transaction ID : CDABR-00000000576207

Amount of Each Receipt this Period
25.00

Memo Item

Above Contribution earmarked through this organization.

B. Mazzio, Margret, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 156-21 90 street

City Howard Beach	State NY	Zip Code 11414
----------------------	-------------	-------------------

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

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

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
10	/	09	/	2021

Transaction ID : CDR-000000000403784

Amount of Each Receipt this Period
1000.00

Memo Item

C. ACTBLUE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401224

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
0.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	09	/	2021

Transaction ID : CDABR-00000000403784

Amount of Each Receipt this Period
1000.00

Memo Item

Above Contribution earmarked through this organization.

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: (check only one)	PAGE 26 OF 47
	<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)
Build the Wave

A. Mazzio, Margret, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 156-21 90 street
 City Howard Beach State NY Zip Code 11414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Mikes Occupation (for Individual) Driver
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 09 / 2021
Transaction ID : CDR-000000000393979
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. ACTBLUE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 441146
 City West Somerville State MA Zip Code 02144-0031
 FEC ID number of contributing federal political committee. **C** C00401224
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 09 / 09 / 2021
Transaction ID : CDABR-000000000393979
 Amount of Each Receipt this Period 1000.00
 Memo Item
 Above Contribution earmarked through this organization.

C. Mazzio, Margret, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 156-21 90 street
 City Howard Beach State NY Zip Code 11414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Mikes Occupation (for Individual) Driver
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 07 / 09 / 2021
Transaction ID : CDR-000000000381206
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	2000.00
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 27 OF 47
	<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)
Build the Wave

A. ACTBLUE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401224

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
MM / DD / YYYY
07 / 09 / 2021

Transaction ID : CDABR-00000000381206

Amount of Each Receipt this Period
1000.00

Memo Item

Above Contribution earmarked through this organization.

B. Mazzio, Margret, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 156-21 90 street

City Howard Beach	State NY	Zip Code 11414
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
08 / 09 / 2021

Transaction ID : CDR-0000000000387951

Amount of Each Receipt this Period
1000.00

Memo Item

C. ACTBLUE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401224

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
0.00

Date of Receipt
MM / DD / YYYY
08 / 09 / 2021

Transaction ID : CDABR-00000000387951

Amount of Each Receipt this Period
1000.00

Memo Item

Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	4710.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)

Build the Wave

Full Name (Last, First, Middle Initial)

A. healthfirst

Mailing Address 100 Church St

City
New York

State
NY

Zip Code
10007

Purpose of Disbursement
Health Insurance

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	7		0	2		2	0	2	1

FEC Identification Number

C [REDACTED]

Transaction ID : CDD-0000000

Amount of Each Disbursement this Period

[REDACTED]	195.15
------------	--------

Memo Item

Full Name (Last, First, Middle Initial)

B. Campaign Deputy

Mailing Address

City

State

Zip Code

Purpose of Disbursement
Compliance 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	7		0	2		2	0	2	1

FEC Identification Number

C [REDACTED]

Transaction ID : CDD-0000000

Amount of Each Disbursement this Period

[REDACTED]	60.00
------------	-------

Memo Item

Full Name (Last, First, Middle Initial)

C. WIX

Mailing Address

City

State

Zip Code

Purpose of Disbursement
Email/website

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	7		0	6		2	0	2	1

FEC Identification Number

C [REDACTED]

Transaction ID : CDD-0000000

Amount of Each Disbursement this Period

[REDACTED]	6.53
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Memo Item

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

[REDACTED]	261.68
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TOTAL This Period (last page this line number only)..... ▶

[REDACTED]	
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**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)
Build the Wave

A. WIX

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement
Website, domain, and email hosting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
07 / 08 / 2021

FEC Identification Number: C

Transaction ID : CDD-0000000

Amount of Each Disbursement this Period: 23.95

Memo Item

B. Google

Full Name (Last, First, Middle Initial)

Mailing Address 1600 Amphitheatre Parkway

City State Zip Code
Mountain View CA 94043

Purpose of Disbursement
Gsuite storage

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
07 / 08 / 2021

FEC Identification Number: C

Transaction ID : CDD-0000000

Amount of Each Disbursement this Period: 19.99

Memo Item

C. Action Network

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code
DC

Purpose of Disbursement
Email platform

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
07 / 09 / 2021

FEC Identification Number: C

Transaction ID : CDD-0000000

Amount of Each Disbursement this Period: 10.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 53.94

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)
Build the Wave

A. Trister Ross Schadler

Full Name (Last, First, Middle Initial)

Mailing Address 1666 Connecticut Ave NW # 5

City Washington State DC Zip Code 20009

Purpose of Disbursement Legal and compliance services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 12 / 2021

FEC Identification Number: C

Transaction ID : CDD-0000000

Amount of Each Disbursement this Period: 2176.66

Memo Item

B. Chandwick Creative

Full Name (Last, First, Middle Initial)

Mailing Address 240 Kent Ave b12

City Brooklyn State NY Zip Code 11249

Purpose of Disbursement Graphic design

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 12 / 2021

FEC Identification Number: C

Transaction ID : CDD-0000000

Amount of Each Disbursement this Period: 975.00

Memo Item

C. WIX

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement Website, domain, and email hosting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 29 / 2021

FEC Identification Number: C

Transaction ID : CDD-0000000

Amount of Each Disbursement this Period: 13.06

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3164.72

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)
Build the Wave

A. Center for Digital Strategy

Full Name (Last, First, Middle Initial)

Mailing Address

City State DC Zip Code

Purpose of Disbursement: Digital training class

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 15 / 2021

FEC Identification Number: C

Transaction ID: CDD-0000000

Amount of Each Disbursement this Period: 50.00

Memo Item

B. Follower Wonk

Full Name (Last, First, Middle Initial)

Mailing Address

City State CA Zip Code

Purpose of Disbursement: Twitter analytics

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 19 / 2021

FEC Identification Number: C

Transaction ID: CDD-0000000

Amount of Each Disbursement this Period: 278.00

Memo Item

C. Music Bed

Full Name (Last, First, Middle Initial)

Mailing Address: 9555 Harmon Rd

City: Fort Worth State: TX Zip Code: 76177

Purpose of Disbursement: Music rights

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 23 / 2021

FEC Identification Number: C

Transaction ID: CDD-0000000

Amount of Each Disbursement this Period: 14.99

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 342.99

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)

Build the Wave

Full Name (Last, First, Middle Initial)

A. Washington Post

Mailing Address 500 Pearl St

City
New York

State
NY

Zip Code
10007

Purpose of Disbursement
Washington Post Subscription

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	3				2	0	2	1

FEC Identification Number

C [REDACTED]

Transaction ID : CDD-0000000

Amount of Each Disbursement this Period

[REDACTED]	10.00
------------	-------

Memo Item

Full Name (Last, First, Middle Initial)

B. Go Daddy Inc.

Mailing Address 14455 N Hayden Rd

City
Scottsdale

State
AZ

Zip Code
85260

Purpose of Disbursement
Domain/web hosting

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	8				2	0	2	1

FEC Identification Number

C [REDACTED]

Transaction ID : CDD-0000000

Amount of Each Disbursement this Period

[REDACTED]	21.17
------------	-------

Memo Item

Full Name (Last, First, Middle Initial)

C. Canva

Mailing Address

City

State

Zip Code

Purpose of Disbursement
Graphic design software

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	8				2	0	2	1

FEC Identification Number

C [REDACTED]

Transaction ID : CDD-0000000

Amount of Each Disbursement this Period

[REDACTED]	12.95
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Memo Item

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

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

[REDACTED]	44.12
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[REDACTED]	
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**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)

Build the Wave

Full Name (Last, First, Middle Initial)

A. Amtrak

Mailing Address 400 North Capitol Street, NW

City
Washington

State
DC

Zip Code
20001

Purpose of Disbursement
Train ticket

002

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 29 / 2021

FEC Identification Number

C

Transaction ID : CDD-0000000

Amount of Each Disbursement this Period

69.00

Memo Item

Full Name (Last, First, Middle Initial)

B. TD Bank

Mailing Address 2035 Limestone Rd

City
Wilmington

State
DE

Zip Code
19808

Purpose of Disbursement
Maintenance fee

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 30 / 2021

FEC Identification Number

C

Transaction ID : CDD-0000000

Amount of Each Disbursement this Period

10.00

Memo Item

Full Name (Last, First, Middle Initial)

C. WIX

Mailing Address

City

State

Zip Code

Purpose of Disbursement
Website, domain, and email hosting

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 30 / 2021

FEC Identification Number

C

Transaction ID : CDD-0000000

Amount of Each Disbursement this Period

43.54

Memo Item

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

122.54

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)

Build the Wave

Full Name (Last, First, Middle Initial)

A. healthfirst

Mailing Address 100 Church St

City
New York

State
NY

Zip Code
10007

Purpose of Disbursement
Health Insurance

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	1

FEC Identification Number

C [REDACTED]

Transaction ID : CDD-0000000

Amount of Each Disbursement this Period

[REDACTED] 195.15

Memo Item

Full Name (Last, First, Middle Initial)

B. Action Network

Mailing Address

City

State
DC

Zip Code

Purpose of Disbursement
Email platform

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		1	0		2	0	2	1

FEC Identification Number

C [REDACTED]

Transaction ID : CDD-0000000

Amount of Each Disbursement this Period

[REDACTED] 27.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Go Daddy Inc.

Mailing Address 14455 N Hayden Rd

City
Scottsdale

State
AZ

Zip Code
85260

Purpose of Disbursement
Domain/web hosting

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		1	0		2	0	2	1

FEC Identification Number

C [REDACTED]

Transaction ID : CDD-0000000

Amount of Each Disbursement this Period

[REDACTED] 58.32

Memo Item

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

[REDACTED] 280.47

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)

Build the Wave

Full Name (Last, First, Middle Initial)

A. Federal Election Commission

Mailing Address 1050 1st St NE

City
Washington

State
DC

Zip Code
20002

Purpose of Disbursement
Admin Fine Program

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 05 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : CDD-0000000

Amount of Each Disbursement this Period

[REDACTED] 500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Zoho

Mailing Address 4141 Hacienda Dr

City
Pleasanton

State
CA

Zip Code
94588

Purpose of Disbursement
Online office suite

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 10 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : CDD-0000000

Amount of Each Disbursement this Period

[REDACTED] 97.99

Memo Item

Full Name (Last, First, Middle Initial)

C. Washington Post

Mailing Address 500 Pearl St

City
New York

State
NY

Zip Code
10007

Purpose of Disbursement
Premium subscription

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 20 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : CDD-0000000

Amount of Each Disbursement this Period

[REDACTED] 10.00

Memo Item

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

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

[REDACTED] 607.99

[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)

Build the Wave

Full Name (Last, First, Middle Initial)

A. Music Bed

Mailing Address 9555 Harmon Rd

City
Fort Worth

State
TX

Zip Code
76177

Purpose of Disbursement
Music rights

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 23 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : CDD-0000000

Amount of Each Disbursement this Period

[REDACTED] 14.99

Memo Item

Full Name (Last, First, Middle Initial)

B. Canva

Mailing Address

City

State

Zip Code

Purpose of Disbursement
Graphic design software

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Date of Disbursement

MM / DD / YYYY
08 / 30 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : CDD-0000000

Amount of Each Disbursement this Period

[REDACTED] 12.95

Memo Item

Full Name (Last, First, Middle Initial)

C. TD Bank

Mailing Address 2035 Limestone Rd

City
Wilmington

State
DE

Zip Code
19808

Purpose of Disbursement
Maintenance fee

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : CDD-0000000

Amount of Each Disbursement this Period

[REDACTED] 10.00

Memo Item

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

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

[REDACTED] 37.94

[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)

Build the Wave

Full Name (Last, First, Middle Initial)

A. WIX

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Website, domain, and email hosting (annual subscription fee)

001

Category/
Type

Candidate Name

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY
09 / 15 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : CDD-0000000

Amount of Each Disbursement this Period

[REDACTED] 265.63

Memo Item

Full Name (Last, First, Middle Initial)

B. healthfirst

Mailing Address 100 Church St

City

New York

State

NY

Zip Code

10007

Purpose of Disbursement

Health insurance

001

Category/
Type

Candidate Name

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY
09 / 03 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : CDD-0000000

Amount of Each Disbursement this Period

[REDACTED] 195.15

Memo Item

Full Name (Last, First, Middle Initial)

C. Action Network

Mailing Address

City

State

DC

Zip Code

Purpose of Disbursement

Email platform

001

Category/
Type

Candidate Name

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY
09 / 09 / 2021

FEC Identification Number

C [REDACTED]

Transaction ID : CDD-0000000

Amount of Each Disbursement this Period

[REDACTED] 10.00

Memo Item

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

[REDACTED] 470.78

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)

Build the Wave

Full Name (Last, First, Middle Initial)

A. MTA New York City

Mailing Address 2 Broadway

City
New York

State
NY

Zip Code
10004

Purpose of Disbursement

002

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 16 / 2021

FEC Identification Number

C
Transaction ID : CDD-0000000
Amount of Each Disbursement this Period
40.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Washington Post

Mailing Address 500 Pearl St

City
New York

State
NY

Zip Code
10007

Purpose of Disbursement
Premium subscription

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 17 / 2021

FEC Identification Number

C
Transaction ID : CDD-0000000
Amount of Each Disbursement this Period
10.00

Memo Item

Full Name (Last, First, Middle Initial)

C. WeWork

Mailing Address 115 West 18th Street

City
New York

State
NY

Zip Code
10011

Purpose of Disbursement
Office

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 20 / 2021

FEC Identification Number

C
Transaction ID : CDD-0000000
Amount of Each Disbursement this Period
106.14

Memo Item

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

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

156.14

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
Build the Wave

A. Music Bed

Full Name (Last, First, Middle Initial)

Mailing Address 9555 Harmon Rd

City Fort Worth State TX Zip Code 76177

Purpose of Disbursement Music rights

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 09 / 23 / 2021

FEC Identification Number C

Transaction ID : CDD-0000000

Amount of Each Disbursement this Period 14.99

Memo Item

B. Canva

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement Graphic design software

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 09 / 29 / 2021

FEC Identification Number C

Transaction ID : CDD-0000000

Amount of Each Disbursement this Period 12.95

Memo Item

C. TD Bank

Full Name (Last, First, Middle Initial)

Mailing Address 2035 Limestone Rd

City Wilmington State DE Zip Code 19808

Purpose of Disbursement Maintenance fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 09 / 30 / 2021

FEC Identification Number C

Transaction ID : CDD-0000000

Amount of Each Disbursement this Period 10.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 37.94

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)

Build the Wave

Full Name (Last, First, Middle Initial)

A. Somos, inc

Mailing Address 33 ELK STREET, SUITE 103

City
Albany

State
NY

Zip Code
12210

Purpose of Disbursement
Political conference

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
10			04			2021			

FEC Identification Number

C [REDACTED]

Transaction ID : CDD-0000000

Amount of Each Disbursement this Period

[REDACTED] 750.00

Memo Item

Full Name (Last, First, Middle Initial)

B. healthfirst

Mailing Address 100 Church St

City
New York

State
NY

Zip Code
10007

Purpose of Disbursement
Health Insurance

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
10			04			2021			

FEC Identification Number

C [REDACTED]

Transaction ID : CDD-0000000

Amount of Each Disbursement this Period

[REDACTED] 195.15

Memo Item

Full Name (Last, First, Middle Initial)

C. WIX

Mailing Address

City

State

Zip Code

Purpose of Disbursement
Website, domain, and email hosting

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
10			08			2021			

FEC Identification Number

C [REDACTED]

Transaction ID : CDD-0000000

Amount of Each Disbursement this Period

[REDACTED] 30.48

Memo Item

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

[REDACTED] 975.63

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)

Build the Wave

Full Name (Last, First, Middle Initial)

A. Go Daddy Inc.

Mailing Address 14455 N Hayden Rd

City Scottsdale State AZ Zip Code 85260

Purpose of Disbursement Domain/web hosting

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
10			04			2021			

FEC Identification Number

Transaction ID : CDD-0000000
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. WeWork

Mailing Address 115 West 18th Street

City New York State NY Zip Code 10011

Purpose of Disbursement Office

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
10			05			2021			

FEC Identification Number

Transaction ID : CDD-0000000
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Amtrak

Mailing Address 400 North Capitol Street, NW

City Washington State DC Zip Code 20001

Purpose of Disbursement

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
10			06			2021			

FEC Identification Number

Transaction ID : CDD-0000000
 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)

Build the Wave

Full Name (Last, First, Middle Initial)

A. Action Network

Mailing Address

City

State
DC

Zip Code

Purpose of Disbursement
Email platform

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
10			06			2021			

FEC Identification Number

C [REDACTED]

Transaction ID : CDD-0000000

Amount of Each Disbursement this Period

[REDACTED] 10.00

Memo Item

Full Name (Last, First, Middle Initial)

B. American Association of Political Consultants

Mailing Address 1750 Tysons Blvd, Ste 1500

City
McLean

State
VA

Zip Code
22102

Purpose of Disbursement
Membership

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
10			15			2021			

FEC Identification Number

C [REDACTED]

Transaction ID : CDD-0000000

Amount of Each Disbursement this Period

[REDACTED] 100.00

Memo Item

Full Name (Last, First, Middle Initial)

C. MTA New York City

Mailing Address 2 Broadway

City
New York

State
NY

Zip Code
10004

Purpose of Disbursement

002

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
10			15			2021			

FEC Identification Number

C [REDACTED]

Transaction ID : CDD-0000000

Amount of Each Disbursement this Period

[REDACTED] 40.00

Memo Item

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

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

[REDACTED] 150.00

[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)

Build the Wave

Full Name (Last, First, Middle Initial)

A. Washington Post

Mailing Address 500 Pearl St

City
New York

State
NY

Zip Code
10007

Purpose of Disbursement
Subscription

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
10			18			2021			

FEC Identification Number

C [REDACTED]

Transaction ID : CDD-0000000

Amount of Each Disbursement this Period

10.00

Memo Item

Full Name (Last, First, Middle Initial)

B. TD Bank

Mailing Address 2035 Limestone Rd

City
Wilmington

State
DE

Zip Code
19808

Purpose of Disbursement
Maintenance 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
10			29			2021			

FEC Identification Number

C [REDACTED]

Transaction ID : CDD-0000000

Amount of Each Disbursement this Period

10.00

Memo Item

Full Name (Last, First, Middle Initial)

C. TD Bank

Mailing Address 2035 Limestone Rd

City
Wilmington

State
DE

Zip Code
19808

Purpose of Disbursement
Overdraft & Deposit return fees

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
10			19			2021			

FEC Identification Number

C [REDACTED]

Transaction ID : CDD-0000000

Amount of Each Disbursement this Period

240.00

Memo Item

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

260.00

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

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**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)

Build the Wave

Full Name (Last, First, Middle Initial)

A. Action Network

Mailing Address

City

State
DC

Zip Code

Purpose of Disbursement
Email platform

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
11			29			2021					

FEC Identification Number

C

Transaction ID : CDD-0000000

Amount of Each Disbursement this Period

10.00

Memo Item

Full Name (Last, First, Middle Initial)

B. TD Bank

Mailing Address 2035 Limestone Rd

City
Wilmington

State
DE

Zip Code
19808

Purpose of Disbursement
Maintenance 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	Y	Y
11			30			2021					

FEC Identification Number

C

Transaction ID : CDD-0000000

Amount of Each Disbursement this Period

10.00

Memo Item

Full Name (Last, First, Middle Initial)

C. healthfirst

Mailing Address 100 Church St

City
New York

State
NY

Zip Code
10007

Purpose of Disbursement
Health Insurance

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
12			02			2021					

FEC Identification Number

C

Transaction ID : CDD-0000000

Amount of Each Disbursement this Period

390.30

Memo Item

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

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

410.30

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**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)
Build the Wave

Full Name (Last, First, Middle Initial)
A. Washington Post

Mailing Address 500 Pearl St

City New York State NY Zip Code 10007

Purpose of Disbursement Subscription
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type: **001**

Date of Disbursement: MM / DD / YYYY
12 / 02 / 2021

FEC Identification Number: **C**
Transaction ID : CDD-0000000
Amount of Each Disbursement this Period: 10.00

Memo Item

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

Mailing Address

City State DC Zip Code

Purpose of Disbursement Email Platform
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type: **001**

Date of Disbursement: MM / DD / YYYY
12 / 10 / 2021

FEC Identification Number: **C**
Transaction ID : CDD-0000000
Amount of Each Disbursement this Period: 10.00

Memo Item

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

Mailing Address 500 Pearl St

City New York State NY Zip Code 10007

Purpose of Disbursement Subscription
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type: **001**

Date of Disbursement: MM / DD / YYYY
12 / 10 / 2021

FEC Identification Number: **C**
Transaction ID : CDD-0000000
Amount of Each Disbursement this Period: 10.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 30.00

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)

Build the Wave

Full Name (Last, First, Middle Initial)

A. TD Bank

Mailing Address 2035 Limestone Rd

City
Wilmington

State
DE

Zip Code
19808

Purpose of Disbursement
Overdraft + wire transfer fees

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
12			22			2021			

FEC Identification Number

C [REDACTED]

Transaction ID : CDD-0000000

Amount of Each Disbursement this Period

170.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Eisikovic & Kane LLP

Mailing Address 1430 Broadway

City
New York

State
NY

Zip Code
10018

Purpose of Disbursement
Accounting & compliance

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
12			22			2021			

FEC Identification Number

C [REDACTED]

Transaction ID : CDD-0000000

Amount of Each Disbursement this Period

2240.75

Memo Item

Full Name (Last, First, Middle Initial)

C. TD Bank

Mailing Address 2035 Limestone Rd

City
Wilmington

State
DE

Zip Code
19808

Purpose of Disbursement
Maintenance 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
12			31			2021			

FEC Identification Number

C [REDACTED]

Transaction ID : CDD-0000000

Amount of Each Disbursement this Period

10.00

Memo Item

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

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

2420.75

10106.11

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" 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)
Build the Wave

A. George Russo

Full Name (Last, First, Middle Initial)

Mailing Address

City State NY Zip Code

Purpose of Disbursement
Refunded contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
08 / 06 / 2021

FEC Identification Number: C

Transaction ID : CDD-0000000

Amount of Each Disbursement this Period: 5000.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	5000.00