

# 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.   
**Progressive Action PAC**

ADDRESS (number and street)   
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
 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:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  in the State of   
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  in the State of

5. Covering Period  10 / 01 / 2012 through  11 / 26 / 2012

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

Type or Print Name of Treasurer Diane Evans

Signature of Treasurer Diane Evans [Electronically Filed] Date  01 / 31 / 2013

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Progressive Action PAC**

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="2012"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="24850.47"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="11284.81"/>	<input type="text" value="105503.91"/>
(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="36135.28"/>	<input type="text" value="105503.91"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="21287.04"/>	<input type="text" value="90655.67"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="14848.24"/>	<input type="text" value="14848.24"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="750.00"/>	

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**Progressive Action PAC**

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).....	3800.00	19600.00
(ii) Unitemized .....	1350.12	8269.22
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	5150.12	27869.22
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	6134.69	77634.69
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	11284.81	105503.91
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))..... ▶	11284.81	105503.91
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	11284.81	105503.91

**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 .....	11287.04	75655.67
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	11287.04	75655.67
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10000.00	15000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(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 .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(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)) ..	21287.04	90655.67
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	21287.04	90655.67

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	11284.81	105503.91
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	11284.81	105503.91
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ▶	11287.04	75655.67
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	11287.04	75655.67

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

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

FOR LINE NUMBER: PAGE 6 OF 19  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Progressive Action PAC**

**A.** Full Name (Last, First, Middle Initial)  
**Chad L Proudlock**

Mailing Address 225 I St NE Suite 102

City Washington State DC Zip Code 20002-4490

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

Name of Employer Proudlock & Associates Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 03 / 2012

**Transaction ID : C4789496**

Amount of Each Receipt this Period  
3800.00

\* In-Kind: Email List Purchase at Fair Market Value

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3800.00
<b>TOTAL</b> This Period (last page this line number only).....▶	3800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 19
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Progressive Action PAC**

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF JARED POLIS COMMITTEE</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 23 / 2012 <b>Transaction ID : C4571014</b>
Mailing Address P.O. BOX 4572		Amount of Each Receipt this Period 500.00
City BOULDER	State CO	Zip Code 80306
FEC ID number of contributing federal political committee. C C00435370		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. CONGRESSIONAL PROGRESSIVE CAUCUS PAC</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 19 / 2012 <b>Transaction ID : C4572266</b>
Mailing Address 1125 12TH STREET NW #62		Amount of Each Receipt this Period 3634.69
City WASHINGTON	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. C C00466201		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3634.69	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF JIM CLYBURN</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 10 / 2012 <b>Transaction ID : C4520709</b>
Mailing Address PO BOX 12567		Amount of Each Receipt this Period 2000.00
City COLUMBIA	State SC	Zip Code 29211
FEC ID number of contributing federal political committee. C C00255562		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6134.69
<b>TOTAL</b> This Period (last page this line number only).....▶	6134.69

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Progressive Action PAC**

Full Name (Last, First, Middle Initial)

**A. ACTBLUE**

Mailing Address P.O. BOX 382110

City State Zip Code  
CAMBRIDGE MA 02238

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 17 / 2012

**Transaction ID : D480840**

Amount of Each Disbursement this Period

0.12

Full Name (Last, First, Middle Initial)

**B. CyberSource/Authorize.net**

Mailing Address 808 East Utah Valley Drive

City State Zip Code  
American Fork UT 84003

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 02 / 2012

**Transaction ID : D492172**

Amount of Each Disbursement this Period

14.72

Full Name (Last, First, Middle Initial)

**C. ACTBLUE**

Mailing Address P.O. BOX 382110

City State Zip Code  
CAMBRIDGE MA 02238

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 29 / 2012

**Transaction ID : D485603**

Amount of Each Disbursement this Period

17.09

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

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

31.93



**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"/> 24	<input type="checkbox"/> 25	<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)  
**Progressive Action PAC**

Full Name (Last, First, Middle Initial)

**A. CyberSource/Authorize.net**

Mailing Address 808 East Utah Valley Drive

City American Fork State UT Zip Code 84003

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		02		2012

**Transaction ID : D492173**

Amount of Each Disbursement this Period

62.40
-------

Full Name (Last, First, Middle Initial)

**B. Amtrak**

Mailing Address 50 Massachusetts Ave NE

City Washington State DC Zip Code 20002-4214

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		26		2012

**Transaction ID : D487233**

Amount of Each Disbursement this Period

218.00
--------

Full Name (Last, First, Middle Initial)

**C. ACTBLUE**

Mailing Address P.O. BOX 382110

City CAMBRIDGE State MA Zip Code 02238

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		15		2012

**Transaction ID : D488144**

Amount of Each Disbursement this Period

0.12
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

280.52
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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"/> 24	<input type="checkbox"/> 25	<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)  
**Progressive Action PAC**

Full Name (Last, First, Middle Initial)

**A. NGP VAN**

Mailing Address 1101 15th Street NW

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Software and Support

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 02 / 2012

**Transaction ID : D484504**

Amount of Each Disbursement this Period

245.00

Full Name (Last, First, Middle Initial)

**B. NGP VAN**

Mailing Address 1101 15th Street NW

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Software and Support

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 02 / 2012

**Transaction ID : D492174**

Amount of Each Disbursement this Period

245.00

Full Name (Last, First, Middle Initial)

**C. ACTBLUE**

Mailing Address P.O. BOX 382110

City CAMBRIDGE State MA Zip Code 02238

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 04 / 2012

**Transaction ID : D486924**

Amount of Each Disbursement this Period

3.01

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

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

493.01

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Progressive Action PAC**

Full Name (Last, First, Middle Initial)

**A. Amtrak**

Mailing Address 50 Massachusetts Ave NE

City Washington State DC Zip Code 20002-4214

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 26 / 2012

**Transaction ID : D487234**

Amount of Each Disbursement this Period

146.00

Full Name (Last, First, Middle Initial)

**B. Chad L Proudlock**

Mailing Address 225 I St NE Suite 102

City Washington State DC Zip Code 20002-4490

Purpose of Disbursement  
Email List Purchase at Fair Market Value

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2012

**Transaction ID : D501305**

Amount of Each Disbursement this Period

3800.00

\* In-Kind Received

Full Name (Last, First, Middle Initial)

**C. ACTBLUE**

Mailing Address P.O. BOX 382110

City CAMBRIDGE State MA Zip Code 02238

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 01 / 2012

**Transaction ID : D485605**

Amount of Each Disbursement this Period

32.27

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

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

3978.27

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Progressive Action PAC**

Full Name (Last, First, Middle Initial)

**A. Union League Cafe**

Mailing Address 140 S. Broad St.

City Philadelphia State PA Zip Code 19102

Purpose of Disbursement  
Catering

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
10 / 29 / 2012

**Transaction ID : D487235**

Amount of Each Disbursement this Period

246.33

Full Name (Last, First, Middle Initial)

**B. CyberSource/Authorize.net**

Mailing Address 808 East Utah Valley Drive

City American Fork State UT Zip Code 84003

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
10 / 02 / 2012

**Transaction ID : D484506**

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Amtrak**

Mailing Address 50 Massachusetts Ave NE

City Washington State DC Zip Code 20002-4214

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
10 / 29 / 2012

**Transaction ID : D487236**

Amount of Each Disbursement this Period

182.00

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

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

478.33

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Progressive Action PAC**

Full Name (Last, First, Middle Initial)

**A. CyberSource/Authorize.net**

Mailing Address 808 East Utah Valley Drive

City American Fork State UT Zip Code 84003

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 02 / 2012

**Transaction ID : D484507**

Amount of Each Disbursement this Period

34.95

Full Name (Last, First, Middle Initial)

**B. Evans & Katz, LLC**

Mailing Address 1831 Bay Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Accounting Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 01 / 2012

**Transaction ID : D486927**

Amount of Each Disbursement this Period

2482.75

Full Name (Last, First, Middle Initial)

**C. The Solvency Group**

Mailing Address 225 I Street NE Suite 102

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Fundraising Consulting Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 01 / 2012

**Transaction ID : D486928**

Amount of Each Disbursement this Period

3500.00

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

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

6017.70

**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"/> 24	<input type="checkbox"/> 25	<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)  
**Progressive Action PAC**

Full Name (Last, First, Middle Initial)

**A. ACTBLUE**

Mailing Address P.O. BOX 382110

City State Zip Code  
CAMBRIDGE MA 02238

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
10 / 19 / 2012

**Transaction ID : D482409**

Amount of Each Disbursement this Period

1.08

Full Name (Last, First, Middle Initial)

**B. ACTBLUE**

Mailing Address P.O. BOX 382110

City State Zip Code  
CAMBRIDGE MA 02238

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
11 / 20 / 2012

**Transaction ID : D492179**

Amount of Each Disbursement this Period

0.20

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Amount of Each Disbursement this Period

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

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

1.28

11281.04

**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 checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Progressive Action PAC**

Full Name (Last, First, Middle Initial)

**A. LOUISE SLAUGHTER RE-ELECTION COMMITTEE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		25		2012

Mailing Address P.O. BOX 730

**Transaction ID : D484720**

City State Zip Code  
HONEOYE NY 14471

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
Contribution

Category/ Type
-------------------

Candidate Name

**LOUISE M SLAUGHTER**

Office Sought:  House  
 Senate  
 President  
State: NY District: 25

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. CAROL SHEA-PORTER FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		25		2012

Mailing Address PO BOX 453

**Transaction ID : D484721**

City State Zip Code  
ROCHESTER NH 03866

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
Contribution

Category/ Type
-------------------

Candidate Name

**CAROL SHEA-PORTER**

Office Sought:  House  
 Senate  
 President  
State: NH District: 01

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF DAVID GILL**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		25		2012

Mailing Address P.O. BOX 163

**Transaction ID : D484731**

City State Zip Code  
SAVOY IL 61874

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
Contribution

Category/ Type
-------------------

Candidate Name

**DAVID MICHAEL GILL**

Office Sought:  House  
 Senate  
 President  
State: IL District: 13

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

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

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

3000.00
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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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Progressive Action PAC**

Full Name (Last, First, Middle Initial)

**A. ROB ZERBAN FOR CONGRESS**

Mailing Address PO BOX 2286

City KENOSHA State WI Zip Code 53141

Purpose of Disbursement  
Contribution

Candidate Name  
**ROB ZERBAN**

Office Sought:  House  
 Senate  
 President  
State: WI District: 01

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			25			2012			

Transaction ID : D484722

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. DR. RAUL RUIZ FOR CONGRESS 2012 COMMITTEE**

Mailing Address PO BOX 6116

City LA QUINTA State CA Zip Code 92248

Purpose of Disbursement  
Contribution

Candidate Name  
**DR. RAUL RUIZ**

Office Sought:  House  
 Senate  
 President  
State: CA District: 36

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			25			2012			

Transaction ID : D484723

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. JOE GARCIA FOR CONGRESS**

Mailing Address 1924 FERDINAND STREET

City CORAL GABLES State FL Zip Code 33134

Purpose of Disbursement  
Contribution

Candidate Name  
**JOE GARCIA**

Office Sought:  House  
 Senate  
 President  
State: FL District: 26

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			25			2012			

Transaction ID : D484733

Amount of Each Disbursement this Period

1000.00
---------

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

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

3000.00
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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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Progressive Action PAC**

Full Name (Last, First, Middle Initial)

**A. KYRSTEN SINEMA FOR CONGRESS**

Mailing Address PO BOX 25879

City TEMPE State AZ Zip Code 85285

Purpose of Disbursement  
Contribution

Candidate Name  
**KYRSTEN SINEMA**

Office Sought:  House  
 Senate  
 President  
State: AZ District: 09

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		25		2012

Transaction ID : **D484724**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. NOLAN FOR CONGRESS VOLUNTEER COMMITTEE**

Mailing Address PO BOX 1041

City BRAINERD State MN Zip Code 56401

Purpose of Disbursement  
Contribution

Candidate Name  
**RICHARD MICHAEL NOLAN**

Office Sought:  House  
 Senate  
 President  
State: MN District: 08

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		25		2012

Transaction ID : **D484726**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. CICILLINE COMMITTEE**

Mailing Address 236 HOPE STREET

City PROVIDENCE State RI Zip Code 02906

Purpose of Disbursement  
Contribution

Candidate Name  
**DAVID N CICILLINE**

Office Sought:  House  
 Senate  
 President  
State: RI District: 01

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		25		2012

Transaction ID : **D484717**

Amount of Each Disbursement this Period

1000.00
---------

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

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

3000.00
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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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**Progressive Action PAC**

Full Name (Last, First, Middle Initial)

**A. JOSE HERNANDEZ FOR CONGRESS**

Mailing Address PO BOX 1667

City State Zip Code  
MODESTO CA 95353

Purpose of Disbursement  
Contribution

Candidate Name  
**JOSE M HERNANDEZ**

Office Sought:  House  
 Senate  
 President  
State: CA District: 10

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 25 / 2012

**Transaction ID : D484728**

Amount of Each Disbursement this Period

1000.00

**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

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

Amount of Each Disbursement this Period

**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

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

Amount of Each Disbursement this Period

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

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

1000.00

10000.00

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

NAME OF COMMITTEE (In Full)  
**Progressive Action PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Wright Strategies LLC</b>	Nature of Debt (Purpose): Software Provider
Mailing Address 323 Center Street Tower Building, Suite 1021, 10th F	
City State Zip Code Little Rock AR 72201	

Outstanding Balance Beginning This Period <input type="text" value="750.00"/>	<b>Transaction ID : D448763</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="750.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="750.00"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text" value="750.00"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="750.00"/>