

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

Progressive Action PAC

ADDRESS (number and street) PO BOX 70980

Check if different than previously reported. (ACC)

Washington DC 20024

2. **FEC IDENTIFICATION NUMBER ▼** C00513176 **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:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|----------------------------------------------------------------|
| <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 checked="" type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|---------------------------------------------------|---------------------------------------|----------------------------------------|

Election on 11 / 06 / 2012 in the State of DC

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 12 / 04 / 2012

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

Office Use Only									
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**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="7484.81"/>	<input type="text" value="101703.91"/>
(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="32335.28"/>	<input type="text" value="101703.91"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="17487.04"/>	<input type="text" value="86855.67"/>
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 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="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: M M / D D / Y Y Y Y 10 / 01 / 2012 To: M M / D D / Y Y Y Y 11 / 26 / 2012

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).....	0.00	15800.00
(ii) Unitemized	1350.12	8269.22
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	1350.12	24069.22
(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)	7484.81	101703.91
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))..... ▶	7484.81	101703.91
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	7484.81	101703.91

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	7487.04	71855.67
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	7487.04	71855.67
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)) ..	17487.04	86855.67
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	17487.04	86855.67

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)	7484.81	101703.91
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7484.81	101703.91
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	7487.04	71855.67
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	7487.04	71855.67

**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 18
<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

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

Full Name (Last, First, Middle Initial)
A. FRIENDS OF JARED POLIS COMMITTEE

Mailing Address P.O. BOX 4572

City BOULDER State CO Zip Code 80306

FEC ID number of contributing federal political committee. **C** C00435370

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2012

Transaction ID : C4571014

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. CONGRESSIONAL PROGRESSIVE CAUCUS PAC

Mailing Address 1125 12TH STREET NW #62

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00466201

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3634.69

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 19 / 2012

Transaction ID : C4572266

Amount of Each Receipt this Period
3634.69

Full Name (Last, First, Middle Initial)
C. FRIENDS OF JIM CLYBURN

Mailing Address PO BOX 12567

City COLUMBIA State SC Zip Code 29211

FEC ID number of contributing federal political committee. **C** C00255562

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

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

Transaction ID : C4520709

Amount of Each Receipt this Period
2000.00

SUBTOTAL of Receipts This Page (optional).....	6134.69
TOTAL 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

M M / D D / Y Y Y Y Y
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

M M / D D / Y Y Y Y Y
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

M M / D D / Y Y Y Y Y
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) ▼

Category/
Type

Date of Disbursement

M M / D D / Y 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) ▼

Category/
Type

Date of Disbursement

M M / D D / Y 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) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : D488144

Amount of Each Disbursement this Period

0.12

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

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

280.52

**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. 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

Full Name (Last, First, Middle Initial)

C. 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

MM / DD / YYYY
10 / 29 / 2012

Transaction ID : D487235

Amount of Each Disbursement this Period

246.33

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

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

424.60

**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 : D484506

Amount of Each Disbursement this Period

50.00

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) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 29 / 2012

Transaction ID : D487236

Amount of Each Disbursement this Period

182.00

Full Name (Last, First, Middle Initial)

C. 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

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

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

266.95

**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. 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)

B. 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

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
10 / 19 / 2012

Transaction ID : D482409

Amount of Each Disbursement this Period

1.08

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

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

5983.83

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

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		2	0		2	0	1	2	0	1

Transaction ID : D492179

Amount of Each Disbursement this Period

0	.	2	0
---	---	---	---

Full Name (Last, First, Middle Initial)

B.

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

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

Amount of Each Disbursement this Period

--	--	--	--

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

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)..... ▶

0	.	2	0
---	---	---	---

7	4	8	1	.	0	4
---	---	---	---	---	---	---

**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

Mailing Address P.O. BOX 730

City State Zip Code
HONEYE NY 14471

Purpose of Disbursement
Contribution

Candidate Name

LOUISE M SLAUGHTER

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

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : D484720

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. CAROL SHEA-PORTER FOR CONGRESS

Mailing Address PO BOX 453

City State Zip Code
ROCHESTER NH 03866

Purpose of Disbursement
Contribution

Candidate Name

CAROL SHEA-PORTER

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

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : D484721

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. FRIENDS OF DAVID GILL

Mailing Address P.O. BOX 163

City State Zip Code
SAVOY IL 61874

Purpose of Disbursement
Contribution

Candidate Name

DAVID MICHAEL GILL

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

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : D484731

Amount of Each Disbursement this Period

1000.00

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

3000.00

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 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

--

**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) ▼

Category/
Type

Date of Disbursement

M M / 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) ▼

Category/
Type

Date of Disbursement

M M / 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) ▼

Category/
Type

Date of Disbursement

M M / 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

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) ▼

Category/
Type

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

Full Name (Last, First, Middle Initial)

B.

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

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

Amount of Each Disbursement this Period

--

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

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)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Progressive Action PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <p style="text-align: center; font-size: 1.2em;">Wright Strategies LLC</p>	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 <div style="border: 1px solid black; padding: 2px; text-align: right;">750.00</div>	Transaction ID : D448763
Amount Incurred This Period <div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>	Payment This Period <div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>
Outstanding Balance at Close of This Period <div style="border: 1px solid black; padding: 2px; text-align: right;">750.00</div>	

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 <div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
Amount Incurred This Period <div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	Payment This Period <div style="border: 1px solid black; padding: 2px; height: 20px;"></div>
Outstanding Balance at Close of This Period <div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	

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 <div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
Amount Incurred This Period <div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	Payment This Period <div style="border: 1px solid black; padding: 2px; height: 20px;"></div>
Outstanding Balance at Close of This Period <div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	

1) SUBTOTALS This Period This Page (optional)..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">750.00</div>
2) TOTALS This Period (last page this line number only)..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">750.00</div>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">750.00</div>