

# 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**  
Congressional Progressive Caucus PAC

ADDRESS (number and street) PO Box 33079  
Check if different than previously reported. (ACC) Washington DC 20033

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C** C00513176 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 M M M / D D D / Y Y Y Y Y Y in the State of  
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period 04 / 01 / 2023 through 04 / 30 / 2023

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Evans, Diane, , ,  
Type or Print Name of Treasurer

Signature of Treasurer Evans, Diane, , , [Electronically Filed] Date 05 / 20 / 2023

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**Congressional Progressive Caucus 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="2023"/>		908643.62
(b) Cash on Hand at Beginning of Reporting Period.....	968947.86	
(c) Total Receipts (from Line 19) .....	47602.09	395969.58
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	1016549.95	1304613.20
7. Total Disbursements (from Line 31).....	82268.09	370331.34
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	934281.86	934281.86
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	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

Congressional Progressive Caucus PAC

Report Covering the Period: From: 04 / 01 / 2023 To: 04 / 30 / 2023

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).....	6250.32	30034.82
(ii) Unitemized .....	38851.77	230434.76
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	45102.09	260469.58
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	2500.00	135500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	47602.09	395969.58
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)).....▶	47602.09	395969.58
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	47602.09	395969.58

**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 .....	81195.09	362983.84
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	81195.09	362983.84
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	1073.00	7347.50
(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)).....	1073.00	7347.50
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)) ..	82268.09	370331.34
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	82268.09	370331.34

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	47602.09	395969.58
34. Total Contribution Refunds (from Line 28(d)) .....	1073.00	7347.50
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	46529.09	388622.08
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	81195.09	362983.84
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	81195.09	362983.84

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 109
	<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)  
**Congressional Progressive Caucus PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Appleby, Gavin, , ,**

Mailing Address 267 Mulberry Trl

City Otto	State NC	Zip Code 28763-0237
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
347.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 10 / 2023

**Transaction ID : VR08C13JFSM8**

Amount of Each Receipt this Period  
3.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Appleby, Gavin, , ,**

Mailing Address 267 Mulberry Trl

City Otto	State NC	Zip Code 28763-0237
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
347.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2023

**Transaction ID : VR08C13KF3Q7**

Amount of Each Receipt this Period  
10.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Appleby, Gavin, , ,**

Mailing Address 267 Mulberry Trl

City Otto	State NC	Zip Code 28763-0237
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
347.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2023

**Transaction ID : VR08C13KF7V8**

Amount of Each Receipt this Period  
5.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	18.00
<b>TOTAL</b> 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 109
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A. Applegate, Mary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 112 Adams Pl  
 City Delmar State NY Zip Code 12054-3001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SUNY Albany Occupation (for Individual) Public Health Physician  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 17 / 2023  
**Transaction ID : VR08C13KD195**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**B. Archer, Mark, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1 Nogales Ct  
 City Novato State CA Zip Code 94947-2903  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 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  
 04 / 17 / 2023  
**Transaction ID : VR08C13KC631**  
 Amount of Each Receipt this Period  
 75.00  
 Memo Item

**C. Ard, Tom, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 827 N Marion St  
 City Oak Park State IL Zip Code 60302-1532  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 10 / 2023  
**Transaction ID : VR08C13JGJ10**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	180.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 109
	<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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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Ard, Tom, , ,

Mailing Address 827 N Marion St

City Oak Park	State IL	Zip Code 60302-1532
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
540.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 17 / 2023

**Transaction ID : VR08C13KCDY0**

Amount of Each Receipt this Period  
15.00

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Ard, Tom, , ,

Mailing Address 827 N Marion St

City Oak Park	State IL	Zip Code 60302-1532
------------------	-------------	------------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
540.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 17 / 2023

**Transaction ID : VR08C13KCM32**

Amount of Each Receipt this Period  
15.00

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Ard, Tom, , ,

Mailing Address 827 N Marion St

City Oak Park	State IL	Zip Code 60302-1532
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
540.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 24 / 2023

**Transaction ID : VR08C13KDYC1**

Amount of Each Receipt this Period  
15.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	45.00
<b>TOTAL</b> 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 109  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Ard, Tom, , ,

Mailing Address 827 N Marion St

City Oak Park      State IL      Zip Code 60302-1532

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

Name of Employer (for Individual) N/A      Occupation (for Individual) Not Employed

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 540.00

Date of Receipt  
 04 / 24 / 2023  
**Transaction ID : VR08C13KE0B9**

Amount of Each Receipt this Period  
 5.00

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Ard, Tom, , ,

Mailing Address 827 N Marion St

City Oak Park      State IL      Zip Code 60302-1532

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

Name of Employer (for Individual) N/A      Occupation (for Individual) Not Employed

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 540.00

Date of Receipt  
 04 / 24 / 2023  
**Transaction ID : VR08C13KE316**

Amount of Each Receipt this Period  
 25.00

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Ard, Tom, , ,

Mailing Address 827 N Marion St

City Oak Park      State IL      Zip Code 60302-1532

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

Name of Employer (for Individual) N/A      Occupation (for Individual) Not Employed

Receipt For:  
 Primary    General  
 Other (specify)

Aggregate Year-to-Date ▼  
 540.00

Date of Receipt  
 04 / 24 / 2023  
**Transaction ID : VR08C13KE324**

Amount of Each Receipt this Period  
 5.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 35.00

**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 109
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Ard, Tom, , ,

Mailing Address 827 N Marion St

City Oak Park	State IL	Zip Code 60302-1532
------------------	-------------	------------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
540.00

Date of Receipt  
04 / 24 / 2023  
**Transaction ID : VR08C13KEEQ2**

Amount of Each Receipt this Period  
50.00

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Arnold, Walt, , ,

Mailing Address 3067 Bedette Rd

City Clifton Spgs	State NY	Zip Code 14432-9771
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Clifton Land Co.	Occupation (for Individual) Tech
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
290.00

Date of Receipt  
04 / 17 / 2023  
**Transaction ID : VR08C13KCEC8**

Amount of Each Receipt this Period  
10.00

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Beard, Louise, H, ,

Mailing Address 2820 Stratford Rd

City Birmingham	State AL	Zip Code 35213-3430
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self-Employed	Occupation (for Individual) Theatrical Producer
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
340.00

Date of Receipt  
04 / 03 / 2023  
**Transaction ID : VR08C13J9JN4**

Amount of Each Receipt this Period  
5.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	65.00
<b>TOTAL</b> 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 109
	<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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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A. Beard, Louise, H, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2820 Stratford Rd  
 City Birmingham State AL Zip Code 35213-3430  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Theatrical Producer  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 340.00

Date of Receipt **04 / 10 / 2023**  
**Transaction ID : VR08C13JFS33**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**B. Beard, Louise, H, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2820 Stratford Rd  
 City Birmingham State AL Zip Code 35213-3430  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Theatrical Producer  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 340.00

Date of Receipt **04 / 10 / 2023**  
**Transaction ID : VR08C13JG5M2**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**C. Beard, Louise, H, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2820 Stratford Rd  
 City Birmingham State AL Zip Code 35213-3430  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Theatrical Producer  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 340.00

Date of Receipt **04 / 10 / 2023**  
**Transaction ID : VR08C13JG5V7**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	25.00
<b>TOTAL</b> 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 109
	<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)  
**Congressional Progressive Caucus PAC**

**A. Beard, Louise, H, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2820 Stratford Rd  
 City Birmingham State AL Zip Code 35213-3430  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Theatrical Producer  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 340.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 17 / 2023  
**Transaction ID : VR08C13KCAE8**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**B. Beard, Louise, H, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2820 Stratford Rd  
 City Birmingham State AL Zip Code 35213-3430  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Theatrical Producer  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 340.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 17 / 2023  
**Transaction ID : VR08C13KCAJ9**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**C. Beard, Louise, H, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2820 Stratford Rd  
 City Birmingham State AL Zip Code 35213-3430  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Theatrical Producer  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 340.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 17 / 2023  
**Transaction ID : VR08C13KCCK1**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	15.00
<b>TOTAL</b> 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 109
	<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)  
**Congressional Progressive Caucus PAC**

**A. Beard, Louise, H, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2820 Stratford Rd  
 City Birmingham State AL Zip Code 35213-3430  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Theatrical Producer  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 340.00

Date of Receipt **04 / 17 / 2023**  
**Transaction ID : VR08C13KCH27**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**B. Beard, Louise, H, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2820 Stratford Rd  
 City Birmingham State AL Zip Code 35213-3430  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Theatrical Producer  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 340.00

Date of Receipt **04 / 24 / 2023**  
**Transaction ID : VR08C13KEBA4**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**C. Beard, Louise, H, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2820 Stratford Rd  
 City Birmingham State AL Zip Code 35213-3430  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Theatrical Producer  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 340.00

Date of Receipt **04 / 24 / 2023**  
**Transaction ID : VR08C13KEC16**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	25.00
<b>TOTAL</b> 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 109
	<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)  
**Congressional Progressive Caucus PAC**

**A. Beard, Louise, H, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2820 Stratford Rd  
 City Birmingham State AL Zip Code 35213-3430  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Theatrical Producer  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 340.00

Date of Receipt **04 / 30 / 2023**  
**Transaction ID : VR08C13KF5S8**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**B. Beard, Louise, H, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2820 Stratford Rd  
 City Birmingham State AL Zip Code 35213-3430  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Theatrical Producer  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 340.00

Date of Receipt **04 / 30 / 2023**  
**Transaction ID : VR08C13KF5V4**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**C. Beard, Louise, H, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2820 Stratford Rd  
 City Birmingham State AL Zip Code 35213-3430  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Theatrical Producer  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 340.00

Date of Receipt **04 / 30 / 2023**  
**Transaction ID : VR08C13KF619**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	15.00
<b>TOTAL</b> 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 109
	<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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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A. Bramwell, Judy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 145 Drive  
 City Green River State WY Zip Code 82935  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
 04 / 24 / 2023  
**Transaction ID : VR08C13KE9C6**  
 Amount of Each Receipt this Period 35.00  
 Memo Item

**B. Bramwell, Judy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 145 Drive  
 City Green River State WY Zip Code 82935  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
 04 / 30 / 2023  
**Transaction ID : VR08C13KF908**  
 Amount of Each Receipt this Period 35.00  
 Memo Item

**C. Brownstein, Carol, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1420 Locust St Apt 8N  
 City Philadelphia State PA Zip Code 19102-4206  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 04 / 17 / 2023  
**Transaction ID : VR08C13KCM57**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	85.00
<b>TOTAL</b> 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 109
	<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)  
**Congressional Progressive Caucus PAC**

**A. Brownstein, Carol, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1420 Locust St  
 Apt 8N  
 City Philadelphia State PA Zip Code 19102-4206  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 17 / 2023  
**Transaction ID : VR08C13KVC6**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**B. Brownstein, Carol, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1420 Locust St  
 Apt 8N  
 City Philadelphia State PA Zip Code 19102-4206  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 17 / 2023  
**Transaction ID : VR08C13KD1N0**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**C. Brownstein, Carol, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1420 Locust St  
 Apt 8N  
 City Philadelphia State PA Zip Code 19102-4206  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2023  
**Transaction ID : VR08C13KF669**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	45.00
<b>TOTAL</b> 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 109
	(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)  
**Congressional Progressive Caucus PAC**

**A. Cameron, Paul, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 429 Spruce St  
 City Glen Ellen State CA Zip Code 95442  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) TriNet HR IV LLC Occupation (for Individual) Financial Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 03 / 2023  
**Transaction ID : VR08C13J9HR5**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Cashdan, Eric, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1 Sousa Dr  
 City Sands Point State NY Zip Code 11050-1216  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GUMERSELL CASHDAN INC. Occupation (for Individual) Manufacturers Rep  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 30 / 2023  
**Transaction ID : VR08C13KF0G5**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Charland, Ann, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4612 Bears Paw Ct  
 City Springfield State IL Zip Code 62711-6710  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 320.24

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 10 / 2023  
**Transaction ID : VR08C13JGCK0**  
 Amount of Each Receipt this Period 20.24  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	570.24
<b>TOTAL</b> 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 109
	<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)  
**Congressional Progressive Caucus PAC**

**A. Charland, Ann, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4612 Bears Paw Ct  
 City Springfield State IL Zip Code 62711-6710  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.24

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 17 / 2023  
**Transaction ID : VR08C13KCF71**  
 Amount of Each Receipt this Period  
 35.00  
 Memo Item

**B. Charland, Ann, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4612 Bears Paw Ct  
 City Springfield State IL Zip Code 62711-6710  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.24

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2023  
**Transaction ID : VR08C13KFT96**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

**C. Clark, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 34 River Bluff Ln  
 City Carmichael State CA Zip Code 95608-5269  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 10 / 2023  
**Transaction ID : VR08C13JFZV6**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	145.00
<b>TOTAL</b> 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 109
	<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)  
**Congressional Progressive Caucus PAC**

**A. Cornelius, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5991 Greenwillow Ln S  
 City Jacksonville State FL Zip Code 32277-1639  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 10 / 2023  
**Transaction ID : VR08C13JFTY7**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**B. Cornelius, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5991 Greenwillow Ln S  
 City Jacksonville State FL Zip Code 32277-1639  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 24 / 2023  
**Transaction ID : VR08C13KE797**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**C. Cottet, Carole, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15330 SW Mallard Dr Ste 105  
 City Beaverton State OR Zip Code 97007-9463  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 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  
 04 / 17 / 2023  
**Transaction ID : VR08C13KC649**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	130.00
<b>TOTAL</b> 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 20 OF 109
	<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)  
**Congressional Progressive Caucus PAC**

**A. Cottet, Carole, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15330 SW Mallard Dr  
 Ste 105  
 City Beaverton State OR Zip Code 97007-9463  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **04 / 24 / 2023**  
**Transaction ID : VR08C13KDY22**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Diekemper, Margie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8039 Gannon Ave  
 City Saint Louis State MO Zip Code 63130-3710  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **04 / 17 / 2023**  
**Transaction ID : VR08C13KCEQ5**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. Draper, Anne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1558 Ocean View Ln  
 City Point Roberts State WA Zip Code 98281-8632  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **04 / 10 / 2023**  
**Transaction ID : VR08C13JG615**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	165.00
<b>TOTAL</b> 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 109
	<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)  
**Congressional Progressive Caucus PAC**

**A. Draper, Anne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1558 Ocean View Ln  
 City Point Roberts State WA Zip Code 98281-8632  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **04 / 10 / 2023**  
**Transaction ID : VR08C13JGEF2**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**B. Draper, Anne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1558 Ocean View Ln  
 City Point Roberts State WA Zip Code 98281-8632  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **04 / 17 / 2023**  
**Transaction ID : VR08C13KCKP9**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**C. Draper, Anne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1558 Ocean View Ln  
 City Point Roberts State WA Zip Code 98281-8632  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **04 / 17 / 2023**  
**Transaction ID : VR08C13KCX15**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	35.00
<b>TOTAL</b> 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 109
	<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)  
**Congressional Progressive Caucus PAC**

**A. Ferry, Donald, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1919 Quentin St  
 # 176B  
 City Aurora State CO Zip Code 80045-7125  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.74

Date of Receipt **04 / 30 / 2023**  
**Transaction ID : VR08C13KFCW5**  
 Amount of Each Receipt this Period 20.24  
 Memo Item

**B. Fulwiler, Fran, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2124 NE 43Rd Ave  
 City Portland State OR Zip Code 97213-1329  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 206.00

Date of Receipt **04 / 17 / 2023**  
**Transaction ID : VR08C13KCW20**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Fulwiler, Fran, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2124 NE 43Rd Ave  
 City Portland State OR Zip Code 97213-1329  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 206.00

Date of Receipt **04 / 30 / 2023**  
**Transaction ID : VR08C13KFJB5**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	70.24
<b>TOTAL</b> 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 109
	<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)  
**Congressional Progressive Caucus PAC**

**A. Gallt, Nancy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 273 Charlton Ave  
 City South Orange State NJ Zip Code 07079-2342  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Literary Agent  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 460.00

Date of Receipt **04 / 24 / 2023**  
**Transaction ID : VR08C13KE4Y6**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**B. Gallt, Nancy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 273 Charlton Ave  
 City South Orange State NJ Zip Code 07079-2342  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Literary Agent  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 460.00

Date of Receipt **04 / 30 / 2023**  
**Transaction ID : VR08C13KF3H9**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. Goza, Gregory, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 1519  
 City Sebastopol State CA Zip Code 95473-1519  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 320.00

Date of Receipt **04 / 17 / 2023**  
**Transaction ID : VR08C13KCM24**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 130.00  
**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 24 OF 109
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A. Goza, Gregory, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 1519  
 City Sebastopol State CA Zip Code 95473-1519  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 17 / 2023  
**Transaction ID : VR08C13KCS24**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**B. Goza, Gregory, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 1519  
 City Sebastopol State CA Zip Code 95473-1519  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 24 / 2023  
**Transaction ID : VR08C13KDZ25**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**C. Goza, Gregory, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 1519  
 City Sebastopol State CA Zip Code 95473-1519  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 24 / 2023  
**Transaction ID : VR08C13KE332**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	45.00
<b>TOTAL</b> 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 25 OF 109
	(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)  
**Congressional Progressive Caucus PAC**

**A. Goza, Gregory, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 1519  
 City Sebastopol State CA Zip Code 95473-1519  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2023  
**Transaction ID : VR08C13KEWN5**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**B. Goza, Gregory, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 1519  
 City Sebastopol State CA Zip Code 95473-1519  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2023  
**Transaction ID : VR08C13KFGK3**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**C. Haboucha, Farha, Joyce, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 16 W 16Th St  
 City New York State NY Zip Code 10011-6328  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 430.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 24 / 2023  
**Transaction ID : VR08C13KDR37**  
 Amount of Each Receipt this Period 45.50  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	65.50
<b>TOTAL</b> 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 26 OF 109
	(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

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)  
**Congressional Progressive Caucus PAC**

**A. Haboucha, Farha, Joyce, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 16 W 16Th St  
 City New York State NY Zip Code 10011-6328  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 430.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2023  
**Transaction ID : VR08C13KF3P9**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**B. Hadley, Virginia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 405 Edison St SE  
 City Olympia State WA Zip Code 98501-1820  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Hirsch Center Integrative Medicine Occupation (for Individual) Registered Nurse  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 216.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 03 / 2023  
**Transaction ID : VR08C13J9PP9**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**C. Hadley, Virginia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 405 Edison St SE  
 City Olympia State WA Zip Code 98501-1820  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Hirsch Center Integrative Medicine Occupation (for Individual) Registered Nurse  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 216.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 10 / 2023  
**Transaction ID : VR08C13JG5J6**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<b>TOTAL</b> 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 109
	<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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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A. Hadley, Virginia, , ,**

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

Mailing Address 405 Edison St SE

City Olympia	State WA	Zip Code 98501-1820
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Hirsch Center Integrative Medicine	Occupation (for Individual) Registered Nurse
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
216.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 10 / 2023

**Transaction ID : VR08C13JGDW2**

Amount of Each Receipt this Period  
5.00

Memo Item

**B. Hadley, Virginia, , ,**

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

Mailing Address 405 Edison St SE

City Olympia	State WA	Zip Code 98501-1820
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Hirsch Center Integrative Medicine	Occupation (for Individual) Registered Nurse
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
216.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 10 / 2023

**Transaction ID : VR08C13JGHB7**

Amount of Each Receipt this Period  
5.00

Memo Item

**C. Hadley, Virginia, , ,**

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

Mailing Address 405 Edison St SE

City Olympia	State WA	Zip Code 98501-1820
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Hirsch Center Integrative Medicine	Occupation (for Individual) Registered Nurse
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
216.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 17 / 2023

**Transaction ID : VR08C13KCRH9**

Amount of Each Receipt this Period  
3.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	13.00
<b>TOTAL</b> 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 28 OF 109  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Hadley, Virginia, , ,**

Mailing Address 405 Edison St SE

City Olympia	State WA	Zip Code 98501-1820
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Hirsch Center Integrative Medicine	Occupation (for Individual) Registered Nurse
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
216.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 24 / 2023

**Transaction ID : VR08C13KE3PO**

Amount of Each Receipt this Period  
5.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Hadley, Virginia, , ,**

Mailing Address 405 Edison St SE

City Olympia	State WA	Zip Code 98501-1820
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Hirsch Center Integrative Medicine	Occupation (for Individual) Registered Nurse
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
216.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 24 / 2023

**Transaction ID : VR08C13KE927**

Amount of Each Receipt this Period  
5.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Hadley, Virginia, , ,**

Mailing Address 405 Edison St SE

City Olympia	State WA	Zip Code 98501-1820
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Hirsch Center Integrative Medicine	Occupation (for Individual) Registered Nurse
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
216.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 24 / 2023

**Transaction ID : VR08C13KEBZ0**

Amount of Each Receipt this Period  
5.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	13.00
<b>TOTAL</b> 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 29 OF 109
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A. Hadley, Virginia, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 405 Edison St SE

City Olympia	State WA	Zip Code 98501-1820
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Hirsch Center Integrative Medicine	Occupation (for Individual) Registered Nurse
---	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
216.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2023

**Transaction ID : VR08C13KF712**

Amount of Each Receipt this Period  
5.00

Memo Item

**B. Hadley, Virginia, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 405 Edison St SE

City Olympia	State WA	Zip Code 98501-1820
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Hirsch Center Integrative Medicine	Occupation (for Individual) Registered Nurse
---	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
216.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2023

**Transaction ID : VR08C13KF8S5**

Amount of Each Receipt this Period  
5.00

Memo Item

**C. Hadley, Virginia, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 405 Edison St SE

City Olympia	State WA	Zip Code 98501-1820
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Hirsch Center Integrative Medicine	Occupation (for Individual) Registered Nurse
---	---

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
216.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2023

**Transaction ID : VR08C13KF9M6**

Amount of Each Receipt this Period  
5.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	15.00
<b>TOTAL</b> 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 30 OF 109
	<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)  
**Congressional Progressive Caucus PAC**

**A. Hadley, Virginia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 405 Edison St SE  
 City Olympia State WA Zip Code 98501-1820  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Hirsch Center Integrative Medicine Occupation (for Individual) Registered Nurse  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 216.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2023  
**Transaction ID : VR08C13KFB95**  
 Amount of Each Receipt this Period 3.00  
 Memo Item

**B. Haering, James, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5855 Cartago Dr  
 City Lansing State MI Zip Code 48911-6497  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Physician  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 10 / 2023  
**Transaction ID : VR08C13JFR48**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**C. Haering, James, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5855 Cartago Dr  
 City Lansing State MI Zip Code 48911-6497  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Physician  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 10 / 2023  
**Transaction ID : VR08C13JGAB3**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	108.00
<b>TOTAL</b> 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 31 OF 109
	<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)  
**Congressional Progressive Caucus PAC**

**A. Haering, James, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5855 Cartago Dr  
 City Lansing State MI Zip Code 48911-6497  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Physician  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt 04 / 30 / 2023  
**Transaction ID : VR08C13KFOX8**  
 Amount of Each Receipt this Period 35.00  
 Memo Item

**B. Hammer, Carol, F, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13600 Marina Pointe Dr Unit 604  
 City Marina Del Rey State CA Zip Code 90292-9249  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 04 / 17 / 2023  
**Transaction ID : VR08C13KCF53**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Hammer, Carol, F, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13600 Marina Pointe Dr Unit 604  
 City Marina Del Rey State CA Zip Code 90292-9249  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 04 / 24 / 2023  
**Transaction ID : VR08C13KDTV1**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	135.00
<b>TOTAL</b> 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 32 OF 109
	<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)  
**Congressional Progressive Caucus PAC**

**A. Hammer, Carol, F, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13600 Marina Pointe Dr  
 Unit 604  
 City Marina Del Rey State CA Zip Code 90292-9249  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 24 / 2023  
**Transaction ID : VR08C13KDTW9**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Harris, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8039 Gannon Ave  
 City Saint Louis State MO Zip Code 63130-3710  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 17 / 2023  
**Transaction ID : VR08C13KCHA1**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**C. Ilg, Albert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 45 Royal Oak Dr  
 City West Hartford State CT Zip Code 06107-3122  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Municipal Management Consultant  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 286.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 10 / 2023  
**Transaction ID : VR08C13JG1Q8**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	355.00
<b>TOTAL</b> 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 33 OF 109
	<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)  
**Congressional Progressive Caucus PAC**

**A. Ilg, Albert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 45 Royal Oak Dr  
 City West Hartford State CT Zip Code 06107-3122  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Municipal Management Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 286.00

Date of Receipt  
 04 / 24 / 2023  
**Transaction ID : VR08C13KE7J8**  
 Amount of Each Receipt this Period 7.00  
 Memo Item

**B. Ilg, Albert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 45 Royal Oak Dr  
 City West Hartford State CT Zip Code 06107-3122  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Municipal Management Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 286.00

Date of Receipt  
 04 / 30 / 2023  
**Transaction ID : VR08C13KEY39**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**C. Jabara, Abdeen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 240 E Houston St # M2C  
 City New York State NY Zip Code 10002-1000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 200.24

Date of Receipt  
 04 / 10 / 2023  
**Transaction ID : VR08C13JGJ52**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	27.00
<b>TOTAL</b> 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 34 OF 109
	<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)  
**Congressional Progressive Caucus PAC**

**A. Jabara, Abdeen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 240 E Houston St  
 # M2C  
 City New York State NY Zip Code 10002-1000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.24

Date of Receipt  
 04 / 24 / 2023  
**Transaction ID : VR08C13KEAH6**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**B. Jabara, Abdeen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 240 E Houston St  
 # M2C  
 City New York State NY Zip Code 10002-1000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.24

Date of Receipt  
 04 / 24 / 2023  
**Transaction ID : VR08C13KEAX1**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**C. Johnson, Cecile, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11831 80Th St S  
 City Wisconsin Rapids State WI Zip Code 54494-9472  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) WRPS Occupation (for Individual) Substitute Teacher  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt  
 04 / 10 / 2023  
**Transaction ID : VR08C13JG3T7**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 55.00  
**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 35 OF 109
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A. Johnson, Cecile, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11831 80Th St S  
 City Wisconsin Rapids State WI Zip Code 54494-9472  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) WRPS Occupation (for Individual) Substitute Teacher  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt 04 / 17 / 2023  
**Transaction ID : VR08C13KCME9**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. Johnson, Cecile, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11831 80Th St S  
 City Wisconsin Rapids State WI Zip Code 54494-9472  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) WRPS Occupation (for Individual) Substitute Teacher  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt 04 / 24 / 2023  
**Transaction ID : VR08C13KEFV6**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Keller, Caren, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 177 9Th Ave Apt 3H  
 City New York State NY Zip Code 10011-4972  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 30 / 2023  
**Transaction ID : VR08C13KFQE9**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 145.00  
**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 36 OF 109
	<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)  
**Congressional Progressive Caucus PAC**

**A. Kennedy, Andrew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 31369 Eagles Perch Ln  
 Bonsall Ca USA  
 City: Bonsall State: CA Zip Code: 92003-4612  
 FEC ID number of contributing federal political committee: C  
 Name of Employer (for Individual): N/A Occupation (for Individual): Not Employed  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date: 372.00

Date of Receipt: 04 / 03 / 2023  
**Transaction ID : VR08C13J9MS9**  
 Amount of Each Receipt this Period: 20.00  
 Memo Item

**B. Kennedy, Andrew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 31369 Eagles Perch Ln  
 Bonsall Ca USA  
 City: Bonsall State: CA Zip Code: 92003-4612  
 FEC ID number of contributing federal political committee: C  
 Name of Employer (for Individual): N/A Occupation (for Individual): Not Employed  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date: 372.00

Date of Receipt: 04 / 24 / 2023  
**Transaction ID : VR08C13KE7T1**  
 Amount of Each Receipt this Period: 18.00  
 Memo Item

**C. Kennedy, Andrew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 31369 Eagles Perch Ln  
 Bonsall Ca USA  
 City: Bonsall State: CA Zip Code: 92003-4612  
 FEC ID number of contributing federal political committee: C  
 Name of Employer (for Individual): N/A Occupation (for Individual): Not Employed  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date: 372.00

Date of Receipt: 04 / 30 / 2023  
**Transaction ID : VR08C13KESJ5**  
 Amount of Each Receipt this Period: 40.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... 78.00  
**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 37 OF 109
	<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)  
**Congressional Progressive Caucus PAC**

**A. Kennedy, Andrew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 31369 Eagles Perch Ln  
 Bonsall Ca USA  
 City State Zip Code  
 Bonsall CA 92003-4612  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 N/A Not Employed  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 372.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2023  
**Transaction ID : VR08C13KFHB2**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**B. Landry, Mary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 640 Grant St  
 City State Zip Code  
 Hazleton PA 18201-4065  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 N/A Not Employed  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 241.24

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 10 / 2023  
**Transaction ID : VR08C13JG7N4**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

**C. Landry, Mary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 640 Grant St  
 City State Zip Code  
 Hazleton PA 18201-4065  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 N/A Not Employed  
 Receipt For:  
 Primary  General  
 Other (specify)  
 Aggregate Year-to-Date ▼  
 241.24

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 10 / 2023  
**Transaction ID : VR08C13JG8S8**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	35.00
<b>TOTAL</b> 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 38 OF 109
	<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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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A. Landry, Mary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 640 Grant St  
 City Hazleton State PA Zip Code 18201-4065  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 241.24

Date of Receipt  
 04 / 17 / 2023  
**Transaction ID : VR08C13KCE71**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Landry, Mary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 640 Grant St  
 City Hazleton State PA Zip Code 18201-4065  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 241.24

Date of Receipt  
 04 / 17 / 2023  
**Transaction ID : VR08C13KCEE4**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Landry, Mary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 640 Grant St  
 City Hazleton State PA Zip Code 18201-4065  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 241.24

Date of Receipt  
 04 / 17 / 2023  
**Transaction ID : VR08C13KCF14**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	25.00
<b>TOTAL</b> 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 39 OF 109
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A. Landry, Mary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 640 Grant St  
 City Hazleton State PA Zip Code 18201-4065  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 241.24

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 17 / 2023  
**Transaction ID : VR08C13KCJK2**  
 Amount of Each Receipt this Period 12.00  
 Memo Item

**B. Landry, Mary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 640 Grant St  
 City Hazleton State PA Zip Code 18201-4065  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 241.24

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 24 / 2023  
**Transaction ID : VR08C13KDSZ1**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Landry, Mary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 640 Grant St  
 City Hazleton State PA Zip Code 18201-4065  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 241.24

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 24 / 2023  
**Transaction ID : VR08C13KEHG3**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	32.00
<b>TOTAL</b> 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 40 OF 109  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A. Landry, Mary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 640 Grant St  
 City Hazleton State PA Zip Code 18201-4065  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 241.24

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 24 / 2023  
**Transaction ID : VR08C13KEHT2**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**B. Landry, Mary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 640 Grant St  
 City Hazleton State PA Zip Code 18201-4065  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 241.24

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2023  
**Transaction ID : VR08C13KFEJ2**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Landry, Mary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 640 Grant St  
 City Hazleton State PA Zip Code 18201-4065  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 241.24

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2023  
**Transaction ID : VR08C13KFSF0**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**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 41 OF 109
	(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)  
**Congressional Progressive Caucus PAC**

**A. Landry, Mary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 640 Grant St  
 City Hazleton State PA Zip Code 18201-4065  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 241.24

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2023  
**Transaction ID : VR08C13KFSP6**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Landry, Mary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 640 Grant St  
 City Hazleton State PA Zip Code 18201-4065  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 241.24

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2023  
**Transaction ID : VR08C13KFT20**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Lane, Mary, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1107 S Old Wilke Rd Apt 306  
 City Arlington Heights State IL Zip Code 60005-2938  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 03 / 2023  
**Transaction ID : VR08C13J9JW8**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**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 42 OF 109
	<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
-----------------------------	-----------------------------	-----------------------------

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)  
**Congressional Progressive Caucus PAC**

**A. Lane, Mary, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1107 S Old Wilke Rd  
 Apt 306  
 City Arlington Heights State IL Zip Code 60005-2938  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 03 / 2023  
**Transaction ID : VR08C13J9K17**  
 Amount of Each Receipt this Period  
 4.00  
 Memo Item

**B. Lane, Mary, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1107 S Old Wilke Rd  
 Apt 306  
 City Arlington Heights State IL Zip Code 60005-2938  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 10 / 2023  
**Transaction ID : VR08C13JFQJ8**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

**C. Lane, Mary, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1107 S Old Wilke Rd  
 Apt 306  
 City Arlington Heights State IL Zip Code 60005-2938  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 10 / 2023  
**Transaction ID : VR08C13JG469**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	19.00
<b>TOTAL</b> 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 43 OF 109
	<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)  
**Congressional Progressive Caucus PAC**

**A. Lane, Mary, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1107 S Old Wilke Rd  
 Apt 306  
 City Arlington Heights State IL Zip Code 60005-2938  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 10 / 2023  
**Transaction ID : VR08C13JG7B5**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**B. Lane, Mary, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1107 S Old Wilke Rd  
 Apt 306  
 City Arlington Heights State IL Zip Code 60005-2938  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 10 / 2023  
**Transaction ID : VR08C13JGER3**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**C. Lane, Mary, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1107 S Old Wilke Rd  
 Apt 306  
 City Arlington Heights State IL Zip Code 60005-2938  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 17 / 2023  
**Transaction ID : VR08C13KC562**  
 Amount of Each Receipt this Period  
 7.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	17.00
<b>TOTAL</b> 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 44 OF 109
<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A. Lane, Mary, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1107 S Old Wilke Rd  
 Apt 306  
 City Arlington Heights State IL Zip Code 60005-2938  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt **04 / 17 / 2023**  
**Transaction ID : VR08C13KC6N4**  
 Amount of Each Receipt this Period 3.00  
 Memo Item

**B. Lane, Mary, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1107 S Old Wilke Rd  
 Apt 306  
 City Arlington Heights State IL Zip Code 60005-2938  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt **04 / 17 / 2023**  
**Transaction ID : VR08C13KCJQ4**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Lane, Mary, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1107 S Old Wilke Rd  
 Apt 306  
 City Arlington Heights State IL Zip Code 60005-2938  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt **04 / 24 / 2023**  
**Transaction ID : VR08C13KE5J4**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	18.00
<b>TOTAL</b> 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 45 OF 109
	<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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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A. Lane, Mary, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1107 S Old Wilke Rd  
 Apt 306  
 City Arlington Heights State IL Zip Code 60005-2938  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 24 / 2023  
**Transaction ID : VR08C13KE6A4**  
 Amount of Each Receipt this Period  
 4.00  
 Memo Item

**B. Lane, Mary, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1107 S Old Wilke Rd  
 Apt 306  
 City Arlington Heights State IL Zip Code 60005-2938  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 24 / 2023  
**Transaction ID : VR08C13KE6R3**  
 Amount of Each Receipt this Period  
 3.00  
 Memo Item

**C. Lane, Mary, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1107 S Old Wilke Rd  
 Apt 306  
 City Arlington Heights State IL Zip Code 60005-2938  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 24 / 2023  
**Transaction ID : VR08C13KE6T8**  
 Amount of Each Receipt this Period  
 3.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10.00
<b>TOTAL</b> 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 46 OF 109  
(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)  
**Congressional Progressive Caucus PAC**

**A. Lane, Mary, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1107 S Old Wilke Rd  
 Apt 306  
 City Arlington Heights State IL Zip Code 60005-2938  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 24 / 2023  
**Transaction ID : VR08C13KE9K1**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**B. Lane, Mary, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1107 S Old Wilke Rd  
 Apt 306  
 City Arlington Heights State IL Zip Code 60005-2938  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 24 / 2023  
**Transaction ID : VR08C13KED31**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**C. Lane, Mary, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1107 S Old Wilke Rd  
 Apt 306  
 City Arlington Heights State IL Zip Code 60005-2938  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 24 / 2023  
**Transaction ID : VR08C13KEG9**  
 Amount of Each Receipt this Period  
 3.00  
 Memo Item

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

13.00

**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 47 OF 109
	<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)  
**Congressional Progressive Caucus PAC**

**A. Lane, Mary, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1107 S Old Wilke Rd  
 Apt 306  
 City Arlington Heights State IL Zip Code 60005-2938  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt **04 / 24 / 2023**  
**Transaction ID : VR08C13KEJM8**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**B. Lane, Mary, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1107 S Old Wilke Rd  
 Apt 306  
 City Arlington Heights State IL Zip Code 60005-2938  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt **04 / 30 / 2023**  
**Transaction ID : VR08C13KEY70**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**C. Lane, Mary, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1107 S Old Wilke Rd  
 Apt 306  
 City Arlington Heights State IL Zip Code 60005-2938  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt **04 / 30 / 2023**  
**Transaction ID : VR08C13KF177**  
 Amount of Each Receipt this Period 4.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	14.00
<b>TOTAL</b> 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 48 OF 109
	<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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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A. Lane, Mary, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1107 S Old Wilke Rd  
 Apt 306  
 City Arlington Heights State IL Zip Code 60005-2938  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2023  
**Transaction ID : VR08C13KF339**  
 Amount of Each Receipt this Period  
 4.00  
 Memo Item

**B. Lane, Mary, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1107 S Old Wilke Rd  
 Apt 306  
 City Arlington Heights State IL Zip Code 60005-2938  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2023  
**Transaction ID : VR08C13KFFZ5**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**C. Lane, Mary, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1107 S Old Wilke Rd  
 Apt 306  
 City Arlington Heights State IL Zip Code 60005-2938  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2023  
**Transaction ID : VR08C13KFNN8**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	24.00
<b>TOTAL</b> 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 49 OF 109
	<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)  
**Congressional Progressive Caucus PAC**

**A. Lane, Mary, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1107 S Old Wilke Rd  
 Apt 306  
 City Arlington Heights State IL Zip Code 60005-2938  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2023  
**Transaction ID : VR08C13KFT70**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**B. Lawrence, Marta Jo, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15 Verna Hill Rd  
 City Fairfield State CT Zip Code 06824-2157  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2023  
**Transaction ID : VR08C13KF3N1**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. Leonetti, Gina, Maria, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 321 W 104Th St  
 City New York State NY Zip Code 10025-4132  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Film/TV Producer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2023  
**Transaction ID : VR08C13KFFB7**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	355.00
<b>TOTAL</b> 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 50 OF 109
	<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)  
**Congressional Progressive Caucus PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Long, Jonne, , ,</b>		Date of Receipt MM / DD / YYYY 04 / 10 / 2023
Mailing Address 6527 N Revere Dr		<b>Transaction ID : VR08C13JGHKO</b>
City Kansas City	State MO	Zip Code 64151-3913
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 25.00	
Name of Employer (for Individual) N/A	Occupation (for Individual) Retired	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 212.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Long, Jonne, , ,</b>		Date of Receipt MM / DD / YYYY 04 / 24 / 2023
Mailing Address 6527 N Revere Dr		<b>Transaction ID : VR08C13KDYV0</b>
City Kansas City	State MO	Zip Code 64151-3913
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 3.00	
Name of Employer (for Individual) N/A	Occupation (for Individual) Retired	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 212.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Long, Jonne, , ,</b>		Date of Receipt MM / DD / YYYY 04 / 24 / 2023
Mailing Address 6527 N Revere Dr		<b>Transaction ID : VR08C13KE5M0</b>
City Kansas City	State MO	Zip Code 64151-3913
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 10.00	
Name of Employer (for Individual) N/A	Occupation (for Individual) Retired	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 212.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	38.00
<b>TOTAL</b> 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 51 OF 109
	<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)  
**Congressional Progressive Caucus PAC**

**A. Long, Jonne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6527 N Revere Dr  
 City Kansas City State MO Zip Code 64151-3913  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 212.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2023  
**Transaction ID : VR08C13KFE33**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**B. Mage, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7008 Wilson Ln  
 City Bethesda State MD Zip Code 20817-4926  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2023  
**Transaction ID : VR08C13KFQB5**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**C. Mardula, Doug, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3384 Indian Hills Dr  
 City Pace State FL Zip Code 32571-8729  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Bose Occupation (for Individual) Product Consultant  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 227.40

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 10 / 2023  
**Transaction ID : VR08C13JFYD2**  
 Amount of Each Receipt this Period  
 20.24  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	135.24
<b>TOTAL</b> 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 52 OF 109
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A. Mardula, Doug, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3384 Indian Hills Dr  
 City Pace State FL Zip Code 32571-8729  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Bose Occupation (for Individual) Product Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 227.40

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 10 / 2023  
**Transaction ID : VR08C13JG5H8**  
 Amount of Each Receipt this Period  
 20.24  
 Memo Item

**B. Mardula, Doug, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3384 Indian Hills Dr  
 City Pace State FL Zip Code 32571-8729  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Bose Occupation (for Individual) Product Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 227.40

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 10 / 2023  
**Transaction ID : VR08C13JGKN1**  
 Amount of Each Receipt this Period  
 20.24  
 Memo Item

**C. Mardula, Doug, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3384 Indian Hills Dr  
 City Pace State FL Zip Code 32571-8729  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Bose Occupation (for Individual) Product Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 227.40

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 17 / 2023  
**Transaction ID : VR08C13KCF48**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	55.48
<b>TOTAL</b> 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 53 OF 109
	<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)  
**Congressional Progressive Caucus PAC**

**A. Mardula, Doug, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3384 Indian Hills Dr  
 City Pace State FL Zip Code 32571-8729  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Bose Occupation (for Individual) Product Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 227.40

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 24 / 2023  
**Transaction ID : VR08C13KEHK7**  
 Amount of Each Receipt this Period  
 20.24  
 Memo Item

**B. Mardula, Doug, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3384 Indian Hills Dr  
 City Pace State FL Zip Code 32571-8729  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Bose Occupation (for Individual) Product Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 227.40

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 24 / 2023  
**Transaction ID : VR08C13KEJG6**  
 Amount of Each Receipt this Period  
 20.24  
 Memo Item

**C. Mardula, Doug, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3384 Indian Hills Dr  
 City Pace State FL Zip Code 32571-8729  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Bose Occupation (for Individual) Product Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 227.40

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2023  
**Transaction ID : VR08C13KFKV2**  
 Amount of Each Receipt this Period  
 20.24  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	60.72
<b>TOTAL</b> 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 54 OF 109
	<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)  
**Congressional Progressive Caucus PAC**

**A. Mardula, Doug, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3384 Indian Hills Dr  
 City Pace State FL Zip Code 32571-8729  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Bose Occupation (for Individual) Product Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 227.40

Date of Receipt **04 / 30 / 2023**  
**Transaction ID : VR08C13KFSJ4**  
 Amount of Each Receipt this Period 20.24  
 Memo Item

**B. Mathison, Jon, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2451 NW 59Th St  
 City Seattle State WA Zip Code 98107-3252  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AIA Corp Occupation (for Individual) Engineer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **04 / 10 / 2023**  
**Transaction ID : VR08C13JFXE9**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. McCarter, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 622 Jefferson Dr  
 City Charlotte State NC Zip Code 28270-5348  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 236.00

Date of Receipt **04 / 03 / 2023**  
**Transaction ID : VR08C13J9MB9**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	125.24
<b>TOTAL</b> 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 55 OF 109  
(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)  
**Congressional Progressive Caucus PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. McCarter, John, , ,**

Mailing Address 622 Jefferson Dr

City Charlotte	State NC	Zip Code 28270-5348
-------------------	-------------	------------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
236.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	10	/	2023

**Transaction ID : VR08C13JFQX3**

Amount of Each Receipt this Period  
4.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. McCarter, John, , ,**

Mailing Address 622 Jefferson Dr

City Charlotte	State NC	Zip Code 28270-5348
-------------------	-------------	------------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
236.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	10	/	2023

**Transaction ID : VR08C13JFZ93**

Amount of Each Receipt this Period  
5.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. McCarter, John, , ,**

Mailing Address 622 Jefferson Dr

City Charlotte	State NC	Zip Code 28270-5348
-------------------	-------------	------------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
236.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	17	/	2023

**Transaction ID : VR08C13KCH85**

Amount of Each Receipt this Period  
5.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	14.00
<b>TOTAL</b> 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 56 OF 109
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A. McCarter, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 622 Jefferson Dr  
 City Charlotte State NC Zip Code 28270-5348  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 236.00

Date of Receipt  
 04 / 17 / 2023  
**Transaction ID : VR08C13KD265**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**B. McCarter, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 622 Jefferson Dr  
 City Charlotte State NC Zip Code 28270-5348  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 236.00

Date of Receipt  
 04 / 24 / 2023  
**Transaction ID : VR08C13KE992**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**C. McCarter, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 622 Jefferson Dr  
 City Charlotte State NC Zip Code 28270-5348  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 236.00

Date of Receipt  
 04 / 30 / 2023  
**Transaction ID : VR08C13KERM0**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	25.00
<b>TOTAL</b> 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 57 OF 109
	<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)  
**Congressional Progressive Caucus PAC**

**A. McCarter, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 622 Jefferson Dr  
 City Charlotte State NC Zip Code 28270-5348  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 236.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2023  
**Transaction ID : VR08C13KERR2**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**B. McCarter, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 622 Jefferson Dr  
 City Charlotte State NC Zip Code 28270-5348  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 236.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2023  
**Transaction ID : VR08C13KET48**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**C. McCarter, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 622 Jefferson Dr  
 City Charlotte State NC Zip Code 28270-5348  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 236.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2023  
**Transaction ID : VR08C13KFGC7**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	15.00
<b>TOTAL</b> 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 58 OF 109
	<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)  
**Congressional Progressive Caucus PAC**

**A. Mcmillan, Sandra, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10 Beaver Rd  
 City Riverside State RI Zip Code 02915-1443  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 10 / 2023  
**Transaction ID : VR08C13JFWD9**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. McNeer, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Contrada Foragno  
 City Biscoe State AR Zip Code 72017  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Hotelier  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 10 / 2023  
**Transaction ID : VR08C13JFT10**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**C. Milner, Renanne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 520 Linden Pl  
 City Dekalb State IL Zip Code 60115-3130  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2023  
**Transaction ID : VR08C13KFQA7**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	450.00
<b>TOTAL</b> 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 59 OF 109
	<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
-----------------------------	-----------------------------	-----------------------------

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)  
**Congressional Progressive Caucus PAC**

**A. Otis, Douglas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 976  
 City Mountain View State CA Zip Code 94042-0976  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 17 / 2023  
**Transaction ID : VR08C13KCYX7**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**B. Plante, Douglas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 331 Laurel Dr  
 City Felton State CA Zip Code 95018-9210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CVS Occupation (for Individual) Clerk  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 17 / 2023  
**Transaction ID : VR08C13KC513**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**C. Poirier, Barbara, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2 Tappan Zee Ln  
 City Niantic State CT Zip Code 06357-1961  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 17 / 2023  
**Transaction ID : VR08C13KCBZ3**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	155.00
<b>TOTAL</b> 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 60 OF 109  
(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)  
**Congressional Progressive Caucus PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Ramsay Merriam, Caroline, , ,**

Mailing Address 1316 30Th St NW

City Washington State DC Zip Code 20007-3343

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

Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
04 / 10 / 2023  
**Transaction ID : VR08C13JFVC8**

Amount of Each Receipt this Period  
15.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Ramsay Merriam, Caroline, , ,**

Mailing Address 1316 30Th St NW

City Washington State DC Zip Code 20007-3343

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

Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
04 / 10 / 2023  
**Transaction ID : VR08C13JGF30**

Amount of Each Receipt this Period  
15.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Ramsay Merriam, Caroline, , ,**

Mailing Address 1316 30Th St NW

City Washington State DC Zip Code 20007-3343

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

Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
04 / 17 / 2023  
**Transaction ID : VR08C13KCNR8**

Amount of Each Receipt this Period  
5.00

Memo Item

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

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

35.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 61 OF 109
	(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

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)  
**Congressional Progressive Caucus PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Ramsay Merriam, Caroline, , ,**

Mailing Address 1316 30Th St NW

City Washington	State DC	Zip Code 20007-3343
--------------------	-------------	------------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	24	/	2023

**Transaction ID : VR08C13KE467**

Amount of Each Receipt this Period  
15.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Ramsay Merriam, Caroline, , ,**

Mailing Address 1316 30Th St NW

City Washington	State DC	Zip Code 20007-3343
--------------------	-------------	------------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2023

**Transaction ID : VR08C13KFNR2**

Amount of Each Receipt this Period  
5.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Riebel Gasner, Corinne, , ,**

Mailing Address 26594 N Anderson Rd

City Lake Barrington	State IL	Zip Code 60084-2325
-------------------------	-------------	------------------------

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

Name of Employer (for Individual) Riebel Services	Occupation (for Individual) Owner
--	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
425.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	10	/	2023

**Transaction ID : VR08C13JGA48**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	45.00
<b>TOTAL</b> 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 62 OF 109
	<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
-----------------------------	-----------------------------	-----------------------------

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)  
**Congressional Progressive Caucus PAC**

**A. Riebel Gasner, Corinne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26594 N Anderson Rd  
 City Lake Barrington State IL Zip Code 60084-2325  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Riebel Services Occupation (for Individual) Owner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt **04 / 30 / 2023**  
**Transaction ID : VR08C13KESS1**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Robbins, Bonnie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2821 Fairview Ave E Unit 8  
 City Seattle State WA Zip Code 98102-3168  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt **04 / 10 / 2023**  
**Transaction ID : VR08C13JG8J3**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Robertson, Annabelle, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 44 Garner Springs Ct  
 City Columbia State SC Zip Code 29209-2179  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **04 / 17 / 2023**  
**Transaction ID : VR08C13KCA56**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	85.00
<b>TOTAL</b> 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 63 OF 109
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A. Robertson, Annabelle, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 44 Garner Springs Ct  
 City Columbia State SC Zip Code 29209-2179  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **04 / 17 / 2023**  
**Transaction ID : VR08C13KCD11**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Robertson, George, E, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3416 19Th Ave S  
 City Seattle State WA Zip Code 98144-6706  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt **04 / 10 / 2023**  
**Transaction ID : VR08C13JFRC2**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**C. Robertson, George, E, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3416 19Th Ave S  
 City Seattle State WA Zip Code 98144-6706  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt **04 / 10 / 2023**  
**Transaction ID : VR08C13JG700**  
 Amount of Each Receipt this Period 27.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	57.00
<b>TOTAL</b> 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 64 OF 109
	<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)  
**Congressional Progressive Caucus PAC**

**A. Robertson, George, E, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3416 19Th Ave S  
 City Seattle State WA Zip Code 98144-6706  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 04 / 30 / 2023  
**Transaction ID : VR08C13KEW35**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Rothenberg, Philip, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 614 W Bell St  
 City Houston State TX Zip Code 77019-4684  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 04 / 30 / 2023  
**Transaction ID : VR08C13KFBD6**  
 Amount of Each Receipt this Period 3.00  
 Memo Item

**C. Salata, Susan, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 74 Heppenstall Dr  
 City Bridgeport State CT Zip Code 06604-1006  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 24 / 2023  
**Transaction ID : VR08C13KEB39**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	68.00
<b>TOTAL</b> 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 65 OF 109  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A. Salata, Susan, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 74 Heppenstall Dr  
 City Bridgeport State CT Zip Code 06604-1006  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 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  
 04 / 24 / 2023  
**Transaction ID : VR08C13KEFG0**  
 Amount of Each Receipt this Period 12.00  
 Memo Item

**B. Salata, Susan, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 74 Heppenstall Dr  
 City Bridgeport State CT Zip Code 06604-1006  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 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  
 04 / 24 / 2023  
**Transaction ID : VR08C13KEFK3**  
 Amount of Each Receipt this Period 11.00  
 Memo Item

**C. Salata, Susan, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 74 Heppenstall Dr  
 City Bridgeport State CT Zip Code 06604-1006  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 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  
 04 / 24 / 2023  
**Transaction ID : VR08C13KEFN9**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

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

33.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 66 OF 109
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A. Salata, Susan, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 74 Heppenstall Dr  
 City Bridgeport State CT Zip Code 06604-1006  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 04 / 30 / 2023  
**Transaction ID : VR08C13KFD48**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**B. Salter, Carolyn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 419 S Royall St  
 City Palestine State TX Zip Code 75801-3637  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Physician  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 04 / 30 / 2023  
**Transaction ID : VR08C13KF3M3**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Schoemehl, Mary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 701 Mirror Lake Dr N Apt 120  
 City Saint Petersburg State FL Zip Code 33701-3257  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 04 / 03 / 2023  
**Transaction ID : VR08C13J9JA7**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	270.00
<b>TOTAL</b> 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 67 OF 109
	<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)  
**Congressional Progressive Caucus PAC**

**A. Schoemehl, Mary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 701 Mirror Lake Dr N  
 Apt 120  
 City Saint Petersburg State FL Zip Code 33701-3257  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt **04 / 10 / 2023**  
**Transaction ID : VR08C13JGFB3**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**B. Schoemehl, Mary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 701 Mirror Lake Dr N  
 Apt 120  
 City Saint Petersburg State FL Zip Code 33701-3257  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt **04 / 30 / 2023**  
**Transaction ID : VR08C13KEXV6**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**C. Schoemehl, Mary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 701 Mirror Lake Dr N  
 Apt 120  
 City Saint Petersburg State FL Zip Code 33701-3257  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt **04 / 30 / 2023**  
**Transaction ID : VR08C13KF602**  
 Amount of Each Receipt this Period 4.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	24.00
<b>TOTAL</b> 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 68 OF 109
	<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)  
**Congressional Progressive Caucus PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Schoemehl, Mary, , ,**

Mailing Address 701 Mirror Lake Dr N  
Apt 120

City Saint Petersburg State FL Zip Code 33701-3257

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

Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2023

**Transaction ID : VR08C13KF9X7**

Amount of Each Receipt this Period  
15.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Shanklin, Jan, , ,**

Mailing Address 3881 Woodlake Dr

City Bonita Springs State FL Zip Code 34134-8608

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

Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
340.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 10 / 2023

**Transaction ID : VR08C13JGEP7**

Amount of Each Receipt this Period  
50.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Shanklin, Jan, , ,**

Mailing Address 3881 Woodlake Dr

City Bonita Springs State FL Zip Code 34134-8608

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

Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
340.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 24 / 2023

**Transaction ID : VR08C13KEBC0**

Amount of Each Receipt this Period  
35.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	100.00
<b>TOTAL</b> 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 69 OF 109  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Smith, Dorine, , ,**

Mailing Address 242 Closson St  
 Apt 2

City Santa Fe      State NM      Zip Code 87501-2942

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

Name of Employer (for Individual) N/A      Occupation (for Individual) Retired

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 240.00

Date of Receipt  
 04 / 17 / 2023  
**Transaction ID : VR08C13KCNG5**

Amount of Each Receipt this Period  
 35.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Smith, Dorine, , ,**

Mailing Address 242 Closson St  
 Apt 2

City Santa Fe      State NM      Zip Code 87501-2942

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

Name of Employer (for Individual) N/A      Occupation (for Individual) Retired

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 240.00

Date of Receipt  
 04 / 17 / 2023  
**Transaction ID : VR08C13KCPJ4**

Amount of Each Receipt this Period  
 25.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Solzman, Bamboo, , ,**

Mailing Address 5455 S Hyde Park Blvd

City Chicago      State IL      Zip Code 60615-5805

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

Name of Employer (for Individual) N/A      Occupation (for Individual) Not Employed

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
 337.00

Date of Receipt  
 04 / 10 / 2023  
**Transaction ID : VR08C13JFPGO**

Amount of Each Receipt this Period  
 3.50

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 63.50

**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 70 OF 109
	(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)  
**Congressional Progressive Caucus PAC**

**A. Solzman, Bamboo, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5455 S Hyde Park Blvd  
 City Chicago State IL Zip Code 60615-5805  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 337.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 10 / 2023  
**Transaction ID : VR08C13JFTH7**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**B. Solzman, Bamboo, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5455 S Hyde Park Blvd  
 City Chicago State IL Zip Code 60615-5805  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 337.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 10 / 2023  
**Transaction ID : VR08C13JFTJ5**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**C. Solzman, Bamboo, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5455 S Hyde Park Blvd  
 City Chicago State IL Zip Code 60615-5805  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 337.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 10 / 2023  
**Transaction ID : VR08C13JFXS6**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	25.00
<b>TOTAL</b> 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 71 OF 109		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A. Solzman, Bamboo, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5455 S Hyde Park Blvd  
 City Chicago State IL Zip Code 60615-5805  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 337.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 17 / 2023  
**Transaction ID : VR08C13KCHH4**  
 Amount of Each Receipt this Period  
 3.00  
 Memo Item

**B. Solzman, Bamboo, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5455 S Hyde Park Blvd  
 City Chicago State IL Zip Code 60615-5805  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 337.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 17 / 2023  
**Transaction ID : VR08C13KCMT1**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**C. Solzman, Bamboo, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5455 S Hyde Park Blvd  
 City Chicago State IL Zip Code 60615-5805  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 337.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 17 / 2023  
**Transaction ID : VR08C13KD1Q6**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	13.00
<b>TOTAL</b> 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 72 OF 109
	<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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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A. Solzman, Bamboo, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5455 S Hyde Park Blvd  
 City Chicago State IL Zip Code 60615-5805  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 337.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 24 / 2023  
**Transaction ID : VR08C13KDY98**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**B. Solzman, Bamboo, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5455 S Hyde Park Blvd  
 City Chicago State IL Zip Code 60615-5805  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 337.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 24 / 2023  
**Transaction ID : VR08C13KDZ59**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**C. Solzman, Bamboo, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5455 S Hyde Park Blvd  
 City Chicago State IL Zip Code 60615-5805  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 337.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 24 / 2023  
**Transaction ID : VR08C13KE5Z7**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	35.00
<b>TOTAL</b> 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 73 OF 109
	<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)  
**Congressional Progressive Caucus PAC**

**A. Solzman, Bamboo, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5455 S Hyde Park Blvd  
 City Chicago State IL Zip Code 60615-5805  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 337.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 24 / 2023  
**Transaction ID : VR08C13KE613**  
 Amount of Each Receipt this Period  
 5.00  
 Memo Item

**B. Tiano, Alice, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2318 Village Dr  
 City Louisville State KY Zip Code 40205-1650  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Wells Fargo Occupation (for Individual) Financial Advisor  
 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  
 04 / 10 / 2023  
**Transaction ID : VR08C13JFZQ4**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**C. Tolles, Martha, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 860 Oxford Rd  
 City San Marino State CA Zip Code 91108-1214  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 228.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 03 / 2023  
**Transaction ID : VR08C13J9J82**  
 Amount of Each Receipt this Period  
 7.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	62.00
<b>TOTAL</b> 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 74 OF 109
	(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)  
**Congressional Progressive Caucus PAC**

**A. Tolles, Martha, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 860 Oxford Rd  
 City San Marino State CA Zip Code 91108-1214  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 228.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 17 / 2023  
**Transaction ID : VR08C13KD1G1**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**B. Tolles, Martha, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 860 Oxford Rd  
 City San Marino State CA Zip Code 91108-1214  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 228.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 24 / 2023  
**Transaction ID : VR08C13KE160**  
 Amount of Each Receipt this Period 35.00  
 Memo Item

**C. Treichler, Paula, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 808 S Lynn St  
 City Champaign State IL Zip Code 61820-6313  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 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  
 04 / 10 / 2023  
**Transaction ID : VR08C13JFV78**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	75.00
<b>TOTAL</b> 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 75 OF 109
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A. Treichler, Paula, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 808 S Lynn St  
 City Champaign State IL Zip Code 61820-6313  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 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  
 04 / 10 / 2023  
**Transaction ID : VR08C13JG3Q3**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**B. Treichler, Paula, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 808 S Lynn St  
 City Champaign State IL Zip Code 61820-6313  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 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  
 04 / 17 / 2023  
**Transaction ID : VR08C13KCV00**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**C. Treichler, Paula, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 808 S Lynn St  
 City Champaign State IL Zip Code 61820-6313  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 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  
 04 / 24 / 2023  
**Transaction ID : VR08C13KEBT0**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	45.00
<b>TOTAL</b> 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 76 OF 109
	(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)  
**Congressional Progressive Caucus PAC**

**A. Treichler, Paula, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 808 S Lynn St  
 City Champaign State IL Zip Code 61820-6313  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 04 / 30 / 2023  
**Transaction ID : VR08C13KETM4**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**B. Turner, Demi, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 313 Orange Rd  
 City Montclair State NJ Zip Code 07042-4451  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FFCCM Occupation (for Individual) Physician  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
 04 / 03 / 2023  
**Transaction ID : VR08C13J9Q58**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**C. Turner, Demi, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 313 Orange Rd  
 City Montclair State NJ Zip Code 07042-4451  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FFCCM Occupation (for Individual) Physician  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
 04 / 24 / 2023  
**Transaction ID : VR08C13KE605**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	35.00
<b>TOTAL</b> 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 77 OF 109
	(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)  
**Congressional Progressive Caucus PAC**

**A. Turner, Demi, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 313 Orange Rd  
 City Montclair State NJ Zip Code 07042-4451  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FFCCM Occupation (for Individual) Physician  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt **04 / 24 / 2023**  
**Transaction ID : VR08C13KE7K6**  
 Amount of Each Receipt this Period 35.00  
 Memo Item

**B. Urbanowicz, Wendy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 6163  
 City Vancouver State WA Zip Code 98668-6163  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 297.00

Date of Receipt **04 / 10 / 2023**  
**Transaction ID : VR08C13JG8B7**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**C. Urbanowicz, Wendy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 6163  
 City Vancouver State WA Zip Code 98668-6163  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 297.00

Date of Receipt **04 / 17 / 2023**  
**Transaction ID : VR08C13KCAS4**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	45.00
<b>TOTAL</b> 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 78 OF 109
	<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)  
**Congressional Progressive Caucus PAC**

**A. Urbanowicz, Wendy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 6163  
 City Vancouver State WA Zip Code 98668-6163  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 297.00

Date of Receipt  
 04 / 24 / 2023  
**Transaction ID : VR08C13KDH5**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**B. Urbanowicz, Wendy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 6163  
 City Vancouver State WA Zip Code 98668-6163  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 297.00

Date of Receipt  
 04 / 24 / 2023  
**Transaction ID : VR08C13KEH2**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

**C. Urbanowicz, Wendy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 6163  
 City Vancouver State WA Zip Code 98668-6163  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 297.00

Date of Receipt  
 04 / 24 / 2023  
**Transaction ID : VR08C13KEJT5**  
 Amount of Each Receipt this Period 5.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	15.00
<b>TOTAL</b> 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 79 OF 109
	<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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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Vankuiken, Susan, , ,

Mailing Address 1524 McAllister St

City San Francisco	State CA	Zip Code 94115-4412
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) Sew What	Occupation (for Individual) Designer/Seamstress
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
378.60

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 03 / 2023

**Transaction ID : VR08C13J9S26**

Amount of Each Receipt this Period  
20.24

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Vankuiken, Susan, , ,

Mailing Address 1524 McAllister St

City San Francisco	State CA	Zip Code 94115-4412
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) Sew What	Occupation (for Individual) Designer/Seamstress
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
378.60

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 10 / 2023

**Transaction ID : VR08C13JG7F6**

Amount of Each Receipt this Period  
20.24

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Vankuiken, Susan, , ,

Mailing Address 1524 McAllister St

City San Francisco	State CA	Zip Code 94115-4412
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) Sew What	Occupation (for Individual) Designer/Seamstress
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
378.60

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 10 / 2023

**Transaction ID : VR08C13JG8P4**

Amount of Each Receipt this Period  
10.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	50.48
<b>TOTAL</b> 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 80 OF 109
	<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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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A. Vankuiken, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1524 McAllister St  
 City San Francisco State CA Zip Code 94115-4412  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Sew What Occupation (for Individual) Designer/Seamstress  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 378.60

Date of Receipt **04 / 10 / 2023**  
**Transaction ID : VR08C13JGKD8**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Vankuiken, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1524 McAllister St  
 City San Francisco State CA Zip Code 94115-4412  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Sew What Occupation (for Individual) Designer/Seamstress  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 378.60

Date of Receipt **04 / 17 / 2023**  
**Transaction ID : VR08C13KCJN8**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Vankuiken, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1524 McAllister St  
 City San Francisco State CA Zip Code 94115-4412  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Sew What Occupation (for Individual) Designer/Seamstress  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 378.60

Date of Receipt **04 / 17 / 2023**  
**Transaction ID : VR08C13KCK70**  
 Amount of Each Receipt this Period 20.24  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	40.24
<b>TOTAL</b> 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 81 OF 109  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Vankuiken, Susan, , ,**

Mailing Address 1524 McAllister St

City San Francisco   State CA   Zip Code 94115-4412

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

Name of Employer (for Individual) Sew What   Occupation (for Individual) Designer/Seamstress

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **378.60**

Date of Receipt  
**04 / 24 / 2023**

**Transaction ID : VR08C13KEGQ6**

Amount of Each Receipt this Period  
**20.24**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Vankuiken, Susan, , ,**

Mailing Address 1524 McAllister St

City San Francisco   State CA   Zip Code 94115-4412

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

Name of Employer (for Individual) Sew What   Occupation (for Individual) Designer/Seamstress

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **378.60**

Date of Receipt  
**04 / 24 / 2023**

**Transaction ID : VR08C13KEHD9**

Amount of Each Receipt this Period  
**20.24**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Vankuiken, Susan, , ,**

Mailing Address 1524 McAllister St

City San Francisco   State CA   Zip Code 94115-4412

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

Name of Employer (for Individual) Sew What   Occupation (for Individual) Designer/Seamstress

Receipt For:  
 Primary    General  
 Other (specify)

Aggregate Year-to-Date ▼ **378.60**

Date of Receipt  
**04 / 24 / 2023**

**Transaction ID : VR08C13KEHJ9**

Amount of Each Receipt this Period  
**20.24**

Memo Item

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

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

**60.72**

**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 82 OF 109
	<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)  
**Congressional Progressive Caucus PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Vankuiken, Susan, , ,

Mailing Address 1524 McAllister St

City San Francisco	State CA	Zip Code 94115-4412
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Sew What	Occupation (for Individual) Designer/Seamstress
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
378.60

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 24 / 2023

**Transaction ID : VR08C13KEK42**

Amount of Each Receipt this Period  
20.24

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Vankuiken, Susan, , ,

Mailing Address 1524 McAllister St

City San Francisco	State CA	Zip Code 94115-4412
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) Sew What	Occupation (for Individual) Designer/Seamstress
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
378.60

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2023

**Transaction ID : VR08C13KFRF9**

Amount of Each Receipt this Period  
20.24

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Vankuiken, Susan, , ,

Mailing Address 1524 McAllister St

City San Francisco	State CA	Zip Code 94115-4412
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) Sew What	Occupation (for Individual) Designer/Seamstress
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
378.60

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2023

**Transaction ID : VR08C13KFSH6**

Amount of Each Receipt this Period  
20.24

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	60.72
<b>TOTAL</b> 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 83 OF 109
	<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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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A. Ward, Cliff, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1298 Los Olivos Ave # B  
 City Los Osos State CA Zip Code 93402-3316  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Commercial Salmon Fisher  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 24 / 2023  
**Transaction ID : VR08C13KE5K2**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

**B. Ward, Cliff, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1298 Los Olivos Ave # B  
 City Los Osos State CA Zip Code 93402-3316  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Commercial Salmon Fisher  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2023  
**Transaction ID : VR08C13KEXZ7**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**C. Ward, Cliff, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1298 Los Olivos Ave # B  
 City Los Osos State CA Zip Code 93402-3316  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Commercial Salmon Fisher  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2023  
**Transaction ID : VR08C13KFE66**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	55.00
<b>TOTAL</b> 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 84 OF 109
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Congressional Progressive Caucus PAC**

**A. Winslow, Susan, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27006 Mill Pond Rd

City Capo Beach	State CA	Zip Code 92624-1628
--------------------	-------------	------------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
04		10		2023

**Transaction ID : VR08C13JG5W5**

Amount of Each Receipt this Period  
25.00

Memo Item

**B. Winslow, Susan, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27006 Mill Pond Rd

City Capo Beach	State CA	Zip Code 92624-1628
--------------------	-------------	------------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
04		17		2023

**Transaction ID : VR08C13KCH02**

Amount of Each Receipt this Period  
15.00

Memo Item

**C. Winslow, Susan, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27006 Mill Pond Rd

City Capo Beach	State CA	Zip Code 92624-1628
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
04		24		2023

**Transaction ID : VR08C13KEBJ7**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	65.00
<b>TOTAL</b> 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 85 OF 109
	<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)  
**Congressional Progressive Caucus PAC**

**A. Wood, Andrea, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6701 Pinehaven Rd  
 City Oakland State CA Zip Code 94611-1013  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **540.00**

Date of Receipt **04 / 03 / 2023**  
**Transaction ID : VR08C13J9NE5**  
 Amount of Each Receipt this Period **35.00**  
 Memo Item

**B. Wood, Andrea, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6701 Pinehaven Rd  
 City Oakland State CA Zip Code 94611-1013  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **540.00**

Date of Receipt **04 / 30 / 2023**  
**Transaction ID : VR08C13KFQH2**  
 Amount of Each Receipt this Period **100.00**  
 Memo Item

**C. Wright, Patrick, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 230 Turtle Creek Dr  
 City Silsbee State TX Zip Code 77656-6641  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **216.00**

Date of Receipt **04 / 10 / 2023**  
**Transaction ID : VR08C13JGFX5**  
 Amount of Each Receipt this Period **27.00**  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>162.00</b>
<b>TOTAL</b> 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 86 OF 109
	<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)  
**Congressional Progressive Caucus PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Wright, Patrick, , ,

Mailing Address 230 Turtle Creek Dr

City Silsbee	State TX	Zip Code 77656-6641
-----------------	-------------	------------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
216.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 10 / 2023

**Transaction ID : VR08C13JGFZ1**

Amount of Each Receipt this Period  
27.00

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	27.00
<b>TOTAL</b> This Period (last page this line number only).....	6250.32

**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 87 OF 109
<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)  
**Congressional Progressive Caucus PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
PLANNED PARENTHOOD ACTION FUND INC PAC, DBA PLANNED PARENTHOOD FEDERAL PAC

Mailing Address 123 William St

City New York	State NY	Zip Code 10038-3804
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00314617

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
04	/	27	/	2023

**Transaction ID : VR08C13KD8W1**

Amount of Each Receipt this Period  
2500.00

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2500.00
<b>TOTAL</b> This Period (last page this line number only).....	2500.00

# 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)  
**Congressional Progressive Caucus PAC**

Full Name (Last, First, Middle Initial)

### A. ActBlue Technical Services

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144-3132

Purpose of Disbursement  
Credit Card Processing Fees

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	4		0	3		2	0	2	3

FEC Identification Number

**C** [Redacted]  
**Transaction ID : VQZ94AQH8**  
 Amount of Each Disbursement this Period  
 [Redacted] 98.54

Memo Item

Full Name (Last, First, Middle Initial)

### B. ActBlue Technical Services

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144-3132

Purpose of Disbursement  
Credit Card Processing Fees

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	4		1	0		2	0	2	3

FEC Identification Number

**C** [Redacted]  
**Transaction ID : VQZ94AQH8**  
 Amount of Each Disbursement this Period  
 [Redacted] 328.69

Memo Item

Full Name (Last, First, Middle Initial)

### C. ActBlue Technical Services

Mailing Address 366 Summer St

City Somerville State MA Zip Code 02144-3132

Purpose of Disbursement  
Credit Card Processing Fees

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	4		1	7		2	0	2	3

FEC Identification Number

**C** [Redacted]  
**Transaction ID : VQZ94AQHN**  
 Amount of Each Disbursement this Period  
 [Redacted] 362.55

Memo Item

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

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

[Redacted]	789.78
[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)  
**Congressional Progressive Caucus PAC**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 04 / 24 / 2023	
Mailing Address 366 Summer St		FEC Identification Number C [REDACTED] <b>Transaction ID : VQZ94AQHT</b> Amount of Each Disbursement this Period [REDACTED] 480.73	
City Somerville	State MA	Zip Code 02144-3132	Category/ Type [REDACTED]
Purpose of Disbursement Credit Card Processing Fees		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 04 / 30 / 2023	
Mailing Address 366 Summer St		FEC Identification Number C [REDACTED] <b>Transaction ID : VQZ94AQJ1T</b> Amount of Each Disbursement this Period [REDACTED] 481.31	
City Somerville	State MA	Zip Code 02144-3132	Category/ Type [REDACTED]
Purpose of Disbursement Credit Card Processing Fees		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Aisle 518</b>		Date of Disbursement MM / DD / YYYY 04 / 06 / 2023	
Mailing Address 2045 W Grand Ave Ste B		FEC Identification Number C [REDACTED] <b>Transaction ID : VQZ94AQHD</b> Amount of Each Disbursement this Period [REDACTED] 12000.00	
City Chicago	State IL	Zip Code 60612-1577	Category/ Type [REDACTED]
Purpose of Disbursement Fundraising Consulting Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 12962.04
<b>TOTAL</b> 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)

**Congressional Progressive Caucus PAC**

Full Name (Last, First, Middle Initial)

**A. Aisle 518**

Mailing Address 2045 W Grand Ave  
Ste B

City Chicago State IL Zip Code 60612-1577

Purpose of Disbursement  
Texting Services

Candidate Name

Office Sought:  House  Senate  President  
State: District: Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
04 / 12 / 2023

FEC Identification Number

C  
Transaction ID : VQZ94AQHH  
Amount of Each Disbursement this Period  
13429.19

Memo Item

Full Name (Last, First, Middle Initial)

**B. Aisle 518**

Mailing Address 2045 W Grand Ave  
Ste B

City Chicago State IL Zip Code 60612-1577

Purpose of Disbursement  
Digital Ad Buy

Candidate Name

Office Sought:  House  Senate  President  
State: District: Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
04 / 12 / 2023

FEC Identification Number

C  
Transaction ID : VQZ94AQHH  
Amount of Each Disbursement this Period  
20562.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Amalgamated Bank**

Mailing Address 275 7Th Ave

City New York State NY Zip Code 10001-8400

Purpose of Disbursement  
Bank Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District: Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
04 / 26 / 2023

FEC Identification Number

C  
Transaction ID : VQZ94AQHZ  
Amount of Each Disbursement this Period  
110.00

Memo Item

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

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

34101.19

# 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)  
**Congressional Progressive Caucus PAC**

**A. Amalgamated Bank**

Full Name (Last, First, Middle Initial)

Mailing Address 275 7Th Ave

City New York State NY Zip Code 10001-8400

Purpose of Disbursement Bank Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 26 / 2023

FEC Identification Number: C

Transaction ID : VQZ94AQHZI

Amount of Each Disbursement this Period: 10.00

Memo Item

**B. Amalgamated Bank**

Full Name (Last, First, Middle Initial)

Mailing Address 275 7Th Ave

City New York State NY Zip Code 10001-8400

Purpose of Disbursement Bank Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 26 / 2023

FEC Identification Number: C

Transaction ID : VQZ94AQHZC

Amount of Each Disbursement this Period: 10.00

Memo Item

**C. American Express Company**

Full Name (Last, First, Middle Initial)

Mailing Address 3 World Financial Ctr  
200 Vesey Street

City New York State NY Zip Code 10285-0001

Purpose of Disbursement Credit Card Payment

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 14 / 2023

FEC Identification Number: C

Transaction ID : VQZ94AQHP

Amount of Each Disbursement this Period: 11485.61

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 11505.61

**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)

**Congressional Progressive Caucus PAC**

Full Name (Last, First, Middle Initial)

**A. Adobe**

Mailing Address 345 Park Ave

City San Jose

State CA

Zip Code 95110-2704

Purpose of Disbursement Software Services

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 14 / 2023

FEC Identification Number

C [REDACTED]

Transaction ID : VQZ94AQHQ  
Amount of Each Disbursement this Period

[REDACTED] 58.29

Memo Item

Full Name (Last, First, Middle Initial)

**B. Air Line Pilots Association**

Mailing Address 7950 Jones Branch Dr # 400

City Mc Lean

State VA

Zip Code 22102-3265

Purpose of Disbursement Space Rental

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 14 / 2023

FEC Identification Number

C [REDACTED]

Transaction ID : VQZ94AQHP  
Amount of Each Disbursement this Period

[REDACTED] 364.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Capitol Hill Wine & Spirits**

Mailing Address 323 Pennsylvania Ave SE

City Washington

State DC

Zip Code 20003-1148

Purpose of Disbursement Beverages for Event

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 14 / 2023

FEC Identification Number

C [REDACTED]

Transaction ID : VQZ94AQHQ  
Amount of Each Disbursement this Period

[REDACTED] 310.93

Memo Item

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

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

[REDACTED] 0.00

[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)  
**Congressional Progressive Caucus PAC**

Full Name (Last, First, Middle Initial)

### A. Clipboard.io

Mailing Address 251 Little Falls Dr

City Wilmington State DE Zip Code 19808-1674

Purpose of Disbursement  
Subscription

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
04 / 14 / 2023

FEC Identification Number

C  
Transaction ID : VQZ94AQHP  
Amount of Each Disbursement this Period  
165.00

Memo Item

Full Name (Last, First, Middle Initial)

### B. Clipboard.io

Mailing Address 251 Little Falls Dr

City Wilmington State DE Zip Code 19808-1674

Purpose of Disbursement  
Research Services

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
04 / 14 / 2023

FEC Identification Number

C  
Transaction ID : VQZ94AQHQ  
Amount of Each Disbursement this Period  
2228.77

Memo Item

Full Name (Last, First, Middle Initial)

### C. District Winery

Mailing Address 385 Water St SE

City Washington State DC Zip Code 20003-3725

Purpose of Disbursement  
Food and Event Space

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
04 / 14 / 2023

FEC Identification Number

C  
Transaction ID : VQZ94AQHP  
Amount of Each Disbursement this Period  
2114.20

Memo Item

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

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

0.00

**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)

**Congressional Progressive Caucus PAC**

Full Name (Last, First, Middle Initial)

**A. DJ Dan Goldman LLC**

Mailing Address 8216 Stone Trail Dr

City  
Bethesda

State  
MD

Zip Code  
20817-4556

Purpose of Disbursement  
Event Lighting

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
0	4		1	4		2	0	2	3

FEC Identification Number

C [ ]  
**Transaction ID : VQZ94AQHP**  
Amount of Each Disbursement this Period  
[ ] 450.00 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**B. Google**

Mailing Address 1600 Amphitheatre Pkwy

City  
Mountain View

State  
CA

Zip Code  
94043-1351

Purpose of Disbursement  
Software Services

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
0	4		1	4		2	0	2	3

FEC Identification Number

C [ ]  
**Transaction ID : VQZ94AQHP**  
Amount of Each Disbursement this Period  
[ ] 92.67 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**C. Hewlett-Packard**

Mailing Address 3000 Hanover St

City  
Palo Alto

State  
CA

Zip Code  
94304-1112

Purpose of Disbursement  
Office Supplies

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
0	4		1	4		2	0	2	3

FEC Identification Number

C [ ]  
**Transaction ID : VQZ94AQHP**  
Amount of Each Disbursement this Period  
[ ] 483.32 [ ]

Memo Item

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

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

[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
						0	.	0	0

[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
-----	-----	-----	-----	-----	-----	-----	-----	-----	-----

**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)  
**Congressional Progressive Caucus PAC**

Full Name (Last, First, Middle Initial)

**A. Intuit**

Mailing Address 2632 Marine Way

City Mountain View State CA Zip Code 94043-1126

Purpose of Disbursement  
Software Services

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 14 / 2023

FEC Identification Number

C  
Transaction ID : VQZ94AQHPI  
Amount of Each Disbursement this Period  
90.10

Memo Item

Full Name (Last, First, Middle Initial)

**B. Mailchimp**

Mailing Address 675 Ponce De Leon Ave NE E178

City Atlanta State GA Zip Code 30308-1884

Purpose of Disbursement  
Email Services

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 14 / 2023

FEC Identification Number

C  
Transaction ID : VQZ94AQHQ!  
Amount of Each Disbursement this Period  
106.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Ridgewells Catering**

Mailing Address 5525 Dorsey Ln

City Bethesda State MD Zip Code 20816-1501

Purpose of Disbursement  
Catering

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 14 / 2023

FEC Identification Number

C  
Transaction ID : VQZ94AQHP  
Amount of Each Disbursement this Period  
1077.84

Memo Item

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

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

0.00

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)

Form for line numbers 21b-30b with checkboxes. 21b is checked.

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NAME OF COMMITTEE (In Full)
Congressional Progressive Caucus PAC

Form A: Southwest Airlines. Includes fields for Name, Address, Date of Disbursement (04/14/2023), City (Dallas), State (TX), Zip Code (75235-1908), Purpose (Travel), Candidate Name, Office Sought, Disbursement For, and Amount (8.00).

Form B: Tatango. Includes fields for Name, Address, Date of Disbursement (04/14/2023), City (Seattle), State (WA), Zip Code (98121-3622), Purpose (Texting Services), Candidate Name, Office Sought, Disbursement For, and Amount (629.64).

Form C: Tatango. Includes fields for Name, Address, Date of Disbursement (04/14/2023), City (Seattle), State (WA), Zip Code (98121-3622), Purpose (Texting Services), Candidate Name, Office Sought, Disbursement For, and Amount (631.76).

SUBTOTAL of Disbursements This Page (optional) 0.00
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)  
**Congressional Progressive Caucus PAC**

Full Name (Last, First, Middle Initial)

**A. Tatango**

Mailing Address 2211 Elliott Ave  
Ste 200

City Seattle State WA Zip Code 98121-3622

Purpose of Disbursement  
Texting Services

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 14 / 2023

FEC Identification Number

C  
Transaction ID : VQZ94AQHQ  
Amount of Each Disbursement this Period  
530.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Tatango**

Mailing Address 2211 Elliott Ave  
Ste 200

City Seattle State WA Zip Code 98121-3622

Purpose of Disbursement  
Texting Services

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 14 / 2023

FEC Identification Number

C  
Transaction ID : VQZ94AQHQ  
Amount of Each Disbursement this Period  
586.18

Memo Item

Full Name (Last, First, Middle Initial)

**C. Tatango**

Mailing Address 2211 Elliott Ave  
Ste 200

City Seattle State WA Zip Code 98121-3622

Purpose of Disbursement  
Texting Services

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 14 / 2023

FEC Identification Number

C  
Transaction ID : VQZ94AQHQ  
Amount of Each Disbursement this Period  
586.18

Memo Item

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

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

0.00

# 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)  
**Congressional Progressive Caucus PAC**

**A. Uber Technologies**

Full Name (Last, First, Middle Initial)

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement Transportation

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
04 / 14 / 2023

FEC Identification Number: C

Transaction ID : VQZ94AQHPI

Amount of Each Disbursement this Period: 27.58

Memo Item

**B. Uber Technologies**

Full Name (Last, First, Middle Initial)

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement Transportation

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
04 / 14 / 2023

FEC Identification Number: C

Transaction ID : VQZ94AQHPI

Amount of Each Disbursement this Period: 11.59

Memo Item

**C. Uber Technologies**

Full Name (Last, First, Middle Initial)

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement Transportation

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
04 / 14 / 2023

FEC Identification Number: C

Transaction ID : VQZ94AQHP

Amount of Each Disbursement this Period: 10.96

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 0.00

**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)  
**Congressional Progressive Caucus PAC**

Full Name (Last, First, Middle Initial)

### A. Uber Technologies

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Transportation

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
0	4		1	4		2	0	2	3

FEC Identification Number

**C** [Redacted]  
Transaction ID : VQZ94AQHQ/  
Amount of Each Disbursement this Period  
[Redacted] 3.00

Memo Item

Full Name (Last, First, Middle Initial)

### B. Uber Technologies

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Transportation

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
0	4		1	4		2	0	2	3

FEC Identification Number

**C** [Redacted]  
Transaction ID : VQZ94AQHQ/  
Amount of Each Disbursement this Period  
[Redacted] 14.42

Memo Item

Full Name (Last, First, Middle Initial)

### C. Uber Technologies

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Transportation

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
0	4		1	4		2	0	2	3

FEC Identification Number

**C** [Redacted]  
Transaction ID : VQZ94AQHQ/  
Amount of Each Disbursement this Period  
[Redacted] 14.85

Memo Item

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

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

[Redacted]	0.00
[Redacted]	[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)  
**Congressional Progressive Caucus PAC**

Full Name (Last, First, Middle Initial)

### A. Uber Technologies

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Transportation

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
0	4		1	4		2	0	2	3

FEC Identification Number

**C** [Redacted]  
Transaction ID : VQZ94AQHQ  
Amount of Each Disbursement this Period  
[Redacted] 3.00

Memo Item

Full Name (Last, First, Middle Initial)

### B. Uber Technologies

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Transportation

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
0	4		1	4		2	0	2	3

FEC Identification Number

**C** [Redacted]  
Transaction ID : VQZ94AQHQ  
Amount of Each Disbursement this Period  
[Redacted] 3.00

Memo Item

Full Name (Last, First, Middle Initial)

### C. Uber Technologies

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Transportation

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
0	4		1	4		2	0	2	3

FEC Identification Number

**C** [Redacted]  
Transaction ID : VQZ94AQHQ  
Amount of Each Disbursement this Period  
[Redacted] 6.02

Memo Item

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

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

[Redacted]	0.00
------------	------

[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)  
**Congressional Progressive Caucus PAC**

Full Name (Last, First, Middle Initial)

### A. Uber Technologies

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 14 / 2023

FEC Identification Number

C  
Transaction ID : VQZ94AQHQ  
Amount of Each Disbursement this Period  
30.13

Memo Item

Full Name (Last, First, Middle Initial)

### B. Uber Technologies

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 14 / 2023

FEC Identification Number

C  
Transaction ID : VQZ94AQHQ  
Amount of Each Disbursement this Period  
38.47

Memo Item

Full Name (Last, First, Middle Initial)

### C. Uber Technologies

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Transportation

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 14 / 2023

FEC Identification Number

C  
Transaction ID : VQZ94AQHQ  
Amount of Each Disbursement this Period  
9.26

Memo Item

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

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

0.00

# 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)  
**Congressional Progressive Caucus PAC**

Full Name (Last, First, Middle Initial)

### A. Uber Technologies

Mailing Address 1455 Market St  
FL 4

City San Francisco State CA Zip Code 94103-1355

Purpose of Disbursement  
Transportation

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
0	4		1	4		2	0	2	3

FEC Identification Number

**C** [Redacted]  
Transaction ID : VQZ94AQHQ  
Amount of Each Disbursement this Period  
[Redacted] 13.39

Memo Item

Full Name (Last, First, Middle Initial)

### B. YourMembership

Mailing Address 541 Eastern Point Rd  
Ste 3

City Groton State CT Zip Code 06340-5158

Purpose of Disbursement  
Software Services

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
0	4		1	4		2	0	2	3

FEC Identification Number

**C** [Redacted]  
Transaction ID : VQZ94AQHP  
Amount of Each Disbursement this Period  
[Redacted] 199.00

Memo Item

Full Name (Last, First, Middle Initial)

### C. YourMembership

Mailing Address 541 Eastern Point Rd  
Ste 3

City Groton State CT Zip Code 06340-5158

Purpose of Disbursement  
Software Services

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
0	4		1	4		2	0	2	3

FEC Identification Number

**C** [Redacted]  
Transaction ID : VQZ94AQHP  
Amount of Each Disbursement this Period  
[Redacted] 199.00

Memo Item

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

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

[Redacted]	0.00
[Redacted]	[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)  
**Congressional Progressive Caucus PAC**

Full Name (Last, First, Middle Initial) <b>A. Brown, Evan, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 06 / 2023
Mailing Address 965 Florida Ave NW Apt 728		FEC Identification Number <b>C</b> Transaction ID : VQZ94AQHD Amount of Each Disbursement this Period 3419.49
City Washington	State DC	
Zip Code 20001-5587	Purpose of Disbursement Salary	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Brown, Evan, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 06 / 2023
Mailing Address 965 Florida Ave NW Apt 728		FEC Identification Number <b>C</b> Transaction ID : VQZ94AQHD Amount of Each Disbursement this Period 36.15
City Washington	State DC	
Zip Code 20001-5587	Purpose of Disbursement Cell Phone Reimbursement	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Brown, Evan, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 20 / 2023
Mailing Address 965 Florida Ave NW Apt 728		FEC Identification Number <b>C</b> Transaction ID : VQZ94AQHP Amount of Each Disbursement this Period 3419.50
City Washington	State DC	
Zip Code 20001-5587	Purpose of Disbursement Salary	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

6875.14

**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)  
**Congressional Progressive Caucus PAC**

**A. Brown, Evan, , ,**

Full Name (Last, First, Middle Initial)

Date of Disbursement: 04 / 20 / 2023

Mailing Address: 965 Florida Ave NW, Apt 728

City: Washington, State: DC, Zip Code: 20001-5587

Purpose of Disbursement: Cell Phone and Travel Reimbursement

Candidate Name:

Office Sought:  House,  Senate,  President

Disbursement For:  Primary,  General,  Other (specify) ▼

State: District:

FEC Identification Number: C

Transaction ID: VQZ94AQHP

Amount of Each Disbursement this Period: 1771.83

Memo Item

**B. American Airlines**

Full Name (Last, First, Middle Initial)

Date of Disbursement: 04 / 20 / 2023

Mailing Address: PO Box 619616

City: Dallas, State: TX, Zip Code: 75261-9616

Purpose of Disbursement: Travel

Candidate Name:

Office Sought:  House,  Senate,  President

Disbursement For:  Primary,  General,  Other (specify) ▼

State: District:

FEC Identification Number: C

Transaction ID: VQZ94AQHP

Amount of Each Disbursement this Period: 243.11

Memo Item

**C. American Airlines**

Full Name (Last, First, Middle Initial)

Date of Disbursement: 04 / 20 / 2023

Mailing Address: PO Box 619616

City: Dallas, State: TX, Zip Code: 75261-9616

Purpose of Disbursement: Travel

Candidate Name:

Office Sought:  House,  Senate,  President

Disbursement For:  Primary,  General,  Other (specify) ▼

State: District:

FEC Identification Number: C

Transaction ID: VQZ94AQHP

Amount of Each Disbursement this Period: 574.79

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1771.83

**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)  
**Congressional Progressive Caucus PAC**

**A. Hampton Inn & Suites**

Full Name (Last, First, Middle Initial)

Mailing Address 7930 Jones Branch Dr

City Mc Lean State VA Zip Code 22102-3388

Purpose of Disbursement Lodging

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 20 / 2023

FEC Identification Number: C

Transaction ID : VQZ94AQHQ

Amount of Each Disbursement this Period: 643.80

Memo Item

**B. Southwest Airlines**

Full Name (Last, First, Middle Initial)

Mailing Address 2702 Love Field Dr

City Dallas State TX Zip Code 75235-1908

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 20 / 2023

FEC Identification Number: C

Transaction ID : VQZ94AQHP

Amount of Each Disbursement this Period: 273.98

Memo Item

**C. DC Health Link**

Full Name (Last, First, Middle Initial)

Mailing Address 645 H St NE

City Washington State DC Zip Code 20002-4347

Purpose of Disbursement Health Insurance

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 03 / 2023

FEC Identification Number: C

Transaction ID : VQZ94AQHD

Amount of Each Disbursement this Period: 529.07

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 529.07

**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)  
**Congressional Progressive Caucus PAC**

Full Name (Last, First, Middle Initial)

**A. Elias Law Group**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	2	3

Mailing Address 250 Massachusetts Ave NW  
Ste 400

City Washington State DC Zip Code 20001-5825

FEC Identification Number

**C** [ ]  
**Transaction ID : VQZ94AQHD**  
 Amount of Each Disbursement this Period  
 [ ] 2565.00

Purpose of Disbursement  
Legal Services

[ ]  
 Category/  
 Type

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Memo Item

Full Name (Last, First, Middle Initial)

**B. Fidelity Investments Institutional Operations Company**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	2	3

Mailing Address PO Box 770002

City Cincinnati State OH Zip Code 45277-1102

FEC Identification Number

**C** [ ]  
**Transaction ID : VQZ94AQHD**  
 Amount of Each Disbursement this Period  
 [ ] 805.58

Purpose of Disbursement  
Employee Retirement Plan

[ ]  
 Category/  
 Type

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Memo Item

Full Name (Last, First, Middle Initial)

**C. Fidelity Investments Institutional Operations Company**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	1		2	0	2	3

Mailing Address PO Box 770002

City Cincinnati State OH Zip Code 45277-1102

FEC Identification Number

**C** [ ]  
**Transaction ID : VQZ94AQHP**  
 Amount of Each Disbursement this Period  
 [ ] 805.58

Purpose of Disbursement  
Employee Retirement Plan

[ ]  
 Category/  
 Type

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Memo Item

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

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

[ ] 4176.16  
 [ ]

# 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)  
**Congressional Progressive Caucus PAC**

Full Name (Last, First, Middle Initial) <b>A. Gusto</b>		Date of Disbursement MM / DD / YYYY 04 / 06 / 2023
Mailing Address 525 20Th St		FEC Identification Number C <b>Transaction ID : VQZ94AQHD</b> Amount of Each Disbursement this Period 2057.09
City San Francisco	State CA	
Purpose of Disbursement Payroll Taxes		Memo Item <input type="checkbox"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Gusto</b>		Date of Disbursement MM / DD / YYYY 04 / 12 / 2023
Mailing Address 525 20Th St		FEC Identification Number C <b>Transaction ID : VQZ94AQHH</b> Amount of Each Disbursement this Period 60.11
City San Francisco	State CA	
Purpose of Disbursement Payroll Services		Memo Item <input type="checkbox"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Gusto</b>		Date of Disbursement MM / DD / YYYY 04 / 20 / 2023
Mailing Address 525 20Th St		FEC Identification Number C <b>Transaction ID : VQZ94AQHP</b> Amount of Each Disbursement this Period 2057.07
City San Francisco	State CA	
Purpose of Disbursement Payroll Taxes		Memo Item <input type="checkbox"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4174.27
<b>TOTAL</b> 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 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)  
**Congressional Progressive Caucus PAC**

**A. Carnes, Betty, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 1451 Tobias Gadson Blvd  
Apt 313

City Charleston State SC Zip Code 29407-4772

Purpose of Disbursement Refund

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 04 / 10 / 2023

FEC Identification Number: C

Transaction ID : VQZ94AQHG

Amount of Each Disbursement this Period: 1000.00

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

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

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1000.00