

# 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**

**PODER PAC**

ADDRESS (number and street) **6601 RANNOCH ROAD**

Check if different than previously reported. (ACC) **BETHESDA MD 20817**

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

**C C00452276** 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)
- Mar 20 (M3)
- Apr 20 (M4)
- May 20 (M5)
- Jun 20 (M6)
- Jul 20 (M7)
- Aug 20 (M8)
- Sep 20 (M9)
- Oct 20 (M10)
- Nov 20 (M11) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

- Primary (12P)
- General (12G)
- Runoff (12R)
- Convention (12C)
- Special (12S)

Election on  /  /  in the State of

(d) 30-Day POST-Election Report for the:

- General (30G)
- Runoff (30R)
- Special (30S)

Election on  /  /  in the State of

5. Covering Period  /  /  2021 through  /  /  2021

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

Signature of Treasurer Pino, Catherine, , , [Electronically Filed] Date  /  /  2021

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

**PODER 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="2021"/>		34129.96
(b) Cash on Hand at Beginning of Reporting Period.....	34129.96	
(c) Total Receipts (from Line 19) .....	150575.00	150575.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	184704.96	184704.96
7. Total Disbursements (from Line 31).....	6885.15	6885.15
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	177819.81	177819.81
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

PODER PAC

Report Covering the Period: From: 01 / 01 / 2021 To: 06 / 30 / 2021

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).....	7750.00	7750.00
(ii) Unitemized .....	325.00	325.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	8075.00	8075.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	7500.00	7500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	15575.00	15575.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	135000.00	135000.00
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)).....▶	150575.00	150575.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	150575.00	150575.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	2135.15	2135.15
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	2135.15	2135.15
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	4750.00	4750.00
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)) ..	6885.15	6885.15
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6885.15	6885.15

**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) .....	15575.00	15575.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	15575.00	15575.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	2135.15	2135.15
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	2135.15	2135.15

**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 15
	<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)  
**PODER PAC**

**A. Cisneros, Jacki, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10880 Wilshire Blvd  
 Ste 2100  
 City Los Angeles State CA Zip Code 90024-4121  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) The Gilbert & Jacki Cisneros Foundatio Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **04 / 28 / 2021**  
**Transaction ID : C11214013**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. Flores, Desiree, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 687 West 204th Street #2E  
 City New York State NY Zip Code 10034  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Arcus Foundation Occupation (for Individual) Program Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 17 / 2021**  
**Transaction ID : C11214416**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Jurvetson, Karla, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 350 Second Street, #4  
 City Los Altos State CA Zip Code 94022  
 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 ▼ 5000.00

Date of Receipt **04 / 26 / 2021**  
**Transaction ID : C11213728**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6250.00
<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 15
	<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)  
**PODER PAC**

**A. Montoya, Regina, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5230 Lobello Dr  
 City Dallas State TX Zip Code 75229-5513  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Office of Regina Montoya Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 27 / 2021  
**Transaction ID : C11214008**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Pino, Catherine, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6601 RANNOCH ROAD  
 City Bethesda State MD Zip Code 20817  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) D&P Creative Strategies, LLC Occupation (for Individual) Business Owner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 17 / 2021  
**Transaction ID : C11214414**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. Yeager, Marisa, V, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3534 Beechwood Place  
 City Riverside State CA Zip Code 92506  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Riverside Community College District Occupation (for Individual) Government Relations  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 19 / 2021  
**Transaction ID : C11214958**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1500.00
<b>TOTAL</b> This Period (last page this line number only).....	7750.00

**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 8 OF 15
<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)  
**PODER PAC**

**A. Altria Group, Inc Political Action Committee/ALTRIAPAC**

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

Mailing Address 101 Constitution Avenue, Ste. 400W

City Washington	State DC	Zip Code 20001
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FEC ID number of contributing federal political committee. **C** C00089136

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 M	/	D D D	/	Y Y Y Y Y Y
04	/	27	/	2021

**Transaction ID : C11214014**

Amount of Each Receipt this Period  
2500.00

Memo Item

**B. Comcast Corporation & NBCUniversal Political Action Committee**

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

Mailing Address One Comcast Center  
1701 JFK Boulevard

City Philadelphia	State PA	Zip Code 19103
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FEC ID number of contributing federal political committee. **C** C00248716

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	25	/	2021

**Transaction ID : C11215541**

Amount of Each Receipt this Period  
5000.00

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 M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7500.00
<b>TOTAL</b> This Period (last page this line number only).....	7500.00



**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 9 OF 15
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PODER PAC**

**A. Lovelace Sears, Cynthia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15720 Euclid Avenue NE  
 City Bainbridge Island State WA Zip Code 98110-1185  
 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 ▼ 25000.00

Date of Receipt 06 / 01 / 2021  
**Transaction ID : C11214959**  
 Amount of Each Receipt this Period 25000.00  
 Memo Item  
 non-contribution account

**B. Sears, Olivia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 69 Carmelita Street  
 City San Francisco State CA Zip Code 94117  
 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 ▼ 10000.00

Date of Receipt 06 / 07 / 2021  
**Transaction ID : C11215130**  
 Amount of Each Receipt this Period 10000.00  
 Memo Item  
 non-contribution account

**C. The Golden Mercer Living Trust**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2500 Steiner Street, Unit 10  
 City San Francisco State CA Zip Code 94115  
 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 ▼ 100000.00

Date of Receipt 06 / 11 / 2021  
**Transaction ID : C11215196**  
 Amount of Each Receipt this Period 100000.00  
 Memo Item  
 non-contribution account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	135000.00
<b>TOTAL</b> This Period (last page this line number only).....	135000.00

**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)  
**PODER PAC**

Full Name (Last, First, Middle Initial) <b>A. ACTBLUE</b>		Date of Disbursement MM / DD / YYYY 04 / 26 / 2021
Mailing Address P.O. Box 441146		FEC Identification Number C [ ] <b>Transaction ID : D677851</b> Amount of Each Disbursement this Period [ ] 197.50
City Somerville	State MA	Zip Code 02144
Purpose of Disbursement credit card fees		Category/ Type [ ]
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. ACTBLUE</b>		Date of Disbursement MM / DD / YYYY 04 / 27 / 2021
Mailing Address P.O. Box 441146		FEC Identification Number C [ ] <b>Transaction ID : D677856</b> Amount of Each Disbursement this Period [ ] 9.80
City Somerville	State MA	Zip Code 02144
Purpose of Disbursement credit card fees		Category/ Type [ ]
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. ACTBLUE</b>		Date of Disbursement MM / DD / YYYY 04 / 18 / 2021
Mailing Address P.O. Box 441146		FEC Identification Number C [ ] <b>Transaction ID : D677858</b> Amount of Each Disbursement this Period [ ] 1.98
City Somerville	State MA	Zip Code 02144
Purpose of Disbursement credit card fees		Category/ Type [ ]
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:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 209.28
<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 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)  
**PODER PAC**

Full Name (Last, First, Middle Initial)  
**A. ACTBLUE**

Mailing Address P.O. Box 441146

City Somerville State MA Zip Code 02144

Purpose of Disbursement credit card fees

Candidate Name

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

State: District:

Date of Disbursement: 04 / 28 / 2021

FEC Identification Number: C  
Transaction ID : D677859  
Amount of Each Disbursement this Period: 3.95

Memo Item

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

Mailing Address P.O. Box 441146

City Somerville State MA Zip Code 02144

Purpose of Disbursement credit card fees

Candidate Name

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

State: District:

Date of Disbursement: 04 / 28 / 2021

FEC Identification Number: C  
Transaction ID : D677860  
Amount of Each Disbursement this Period: 39.50

Memo Item

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

Mailing Address P.O. Box 441146

City Somerville State MA Zip Code 02144

Purpose of Disbursement credit card fees

Candidate Name

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

State: District:

Date of Disbursement: 05 / 12 / 2021

FEC Identification Number: C  
Transaction ID : D677935  
Amount of Each Disbursement this Period: 1.98

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 45.43

**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)  
**PODER PAC**

Full Name (Last, First, Middle Initial)

### A. ACTBLUE

Mailing Address P.O. Box 441146

City Somerville State MA Zip Code 02144

Purpose of Disbursement  
credit card fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 17 / 2021

FEC Identification Number

C

Transaction ID : D677936

Amount of Each Disbursement this Period

3.95

Memo Item

Full Name (Last, First, Middle Initial)

### B. ACTBLUE

Mailing Address P.O. Box 441146

City Somerville State MA Zip Code 02144

Purpose of Disbursement  
credit card fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 17 / 2021

FEC Identification Number

C

Transaction ID : D677937

Amount of Each Disbursement this Period

39.50

Memo Item

Full Name (Last, First, Middle Initial)

### C. ACTBLUE

Mailing Address P.O. Box 441146

City Somerville State MA Zip Code 02144

Purpose of Disbursement  
credit card fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 17 / 2021

FEC Identification Number

C

Transaction ID : D677938

Amount of Each Disbursement this Period

9.88

Memo Item

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

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

53.33

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**PODER PAC**

Full Name (Last, First, Middle Initial)  
**A. ACTBLUE**

Mailing Address P.O. Box 441146

City Somerville State MA Zip Code 02144

Purpose of Disbursement credit card fees

Candidate Name

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

State: District:

Date of Disbursement: 05 / 19 / 2021

FEC Identification Number: C

Transaction ID : D677981

Amount of Each Disbursement this Period: 9.88

Memo Item

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

Mailing Address P.O. Box 441146

City Somerville State MA Zip Code 02144

Purpose of Disbursement credit card fees

Candidate Name

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

State: District:

Date of Disbursement: 05 / 18 / 2021

FEC Identification Number: C

Transaction ID : D677982

Amount of Each Disbursement this Period: 4.94

Memo Item

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

Mailing Address 2401 Cameron Mills Road

City Alexandria State VA Zip Code 22302

Purpose of Disbursement consulting-compliance

Candidate Name

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

State: District:

Date of Disbursement: 06 / 16 / 2021

FEC Identification Number: C

Transaction ID : D678037

Amount of Each Disbursement this Period: 250.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 264.82

**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)  
**PODER PAC**

Full Name (Last, First, Middle Initial) <b>A. NGP Van, Inc.</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2021
Mailing Address PO Box 392264		FEC Identification Number C [ ] <b>Transaction ID : D677735</b> Amount of Each Disbursement this Period 1200.00
City Pittsburgh	State PA	Zip Code 15251-9264
Purpose of Disbursement campaign software		Category/ Type [ ]
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. United Bank</b>		Date of Disbursement MM / DD / YYYY 02 / 12 / 2021
Mailing Address 4900 Massachusetts		FEC Identification Number C [ ] <b>Transaction ID : D677732</b> Amount of Each Disbursement this Period 74.79
City Washington	State DC	Zip Code 20016
Purpose of Disbursement Business Checks		Category/ Type [ ]
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Utrecht, Kleinfeld, Fiori, Partners</b>		Date of Disbursement MM / DD / YYYY 06 / 29 / 2021
Mailing Address 1776 Eye Street NW Tenth Floor		FEC Identification Number C [ ] <b>Transaction ID : D678064</b> Amount of Each Disbursement this Period 287.50
City Washington	State DC	Zip Code 20006
Purpose of Disbursement legal services		Category/ Type [ ]
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:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1562.29
<b>TOTAL</b> This Period (last page this line number only).....▶	2135.15

**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 type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**PODER PAC**

**A. Neta Collab, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 901 H Street NE

City Washington State DC Zip Code 20002

Purpose of Disbursement website & rebrand - non-contribution acct

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement 05 / 25 / 2021

FEC Identification Number C

Transaction ID : D677970

Amount of Each Disbursement this Period 4750.00

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).....▶	4750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	4750.00