

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**
PROGRESSIVE CHOICES PAC

ADDRESS (number and street) **P.O. BOX 58**
 Check if different than previously reported. (ACC) **EVANSTON IL 60204**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00381806 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 **11 / 06 / 2018** in the State of **IL**
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period **10 / 01 / 2018** through **10 / 17 / 2018**

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

Signature of Treasurer Lennon, Karen, , , [Electronically Filed] Date **10 / 23 / 2018**

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

PROGRESSIVE CHOICES 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="2018"/>		58209.98
(b) Cash on Hand at Beginning of Reporting Period.....	30406.80	
(c) Total Receipts (from Line 19)	22000.00	130000.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	52406.80	188209.98
7. Total Disbursements (from Line 31).....	8821.69	144624.87
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	43585.11	43585.11
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY 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

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

PROGRESSIVE CHOICES PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y 10 / 01 / 2018 To: M M / D D / Y Y Y Y Y 10 / 17 / 2018

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).....	19500.00	74000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	19500.00	74000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	2500.00	56000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	22000.00	130000.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	22000.00	130000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	22000.00	130000.00

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	821.69	4624.87
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	821.69	4624.87
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	7000.00	136000.00
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	1000.00	1000.00
(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)).....	1000.00	1000.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	3000.00
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)) ..	8821.69	144624.87
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8821.69	144624.87

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	22000.00	130000.00
34. Total Contribution Refunds (from Line 28(d))	1000.00	1000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	21000.00	129000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	821.69	4624.87
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	821.69	4624.87

**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 13
	<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)
PROGRESSIVE CHOICES PAC

A. Moran, Catherine, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4713 N. LaPorte
 City Chicago State IL Zip Code 60630
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SAP Occupation (for Individual) Global Software Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 6000.00

Date of Receipt 10 / 17 / 2018
Transaction ID : SA11AI.4707
 Amount of Each Receipt this Period 3000.00
 Memo Item
 Contribution Refund of \$1000 Issued 10/17/18

B. Rothman, Noel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 180 E. Pearson Street, Apt. 6301
 City Chicago State IL Zip Code 60611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 14 / 2018
Transaction ID : SA11AI.4708
 Amount of Each Receipt this Period 5000.00
 Memo Item
 Conduit: ActBlue

C. Siegel, Catherine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 442 W. Wellington Avenue, #12 West
 City Chicago State IL Zip Code 60657
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-employed Occupation (for Individual) Social Worker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 4000.00

Date of Receipt 10 / 07 / 2018
Transaction ID : SA11AI.4702
 Amount of Each Receipt this Period 1500.00
 Memo Item
 Conduit: ActBlue

SUBTOTAL of Receipts This Page (optional).....	9500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 13
	<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)
PROGRESSIVE CHOICES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Wachowski, Lana, , ,		Date of Receipt										
Mailing Address 5645 N. Ravenswood Avenue		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>07</td> <td></td> <td>2018</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	10		07		2018
M M M	/	D D D	/	Y Y Y Y Y Y								
10		07		2018								
City Chicago	State IL	Zip Code 60660										
FEC ID number of contributing federal political committee. C		Transaction ID : SA11AI.4706										
Name of Employer (for Individual) Self-employed		Amount of Each Receipt this Period										
Occupation (for Individual) Writer/Director		5000.00										
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="checkbox"/> Memo Item Conduit: ActBlue										
5000.00												

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Winslow, Karin, , ,		Date of Receipt										
Mailing Address 5645 N. Ravenswood		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>07</td> <td></td> <td>2018</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	10		07		2018
M M M	/	D D D	/	Y Y Y Y Y Y								
10		07		2018								
City Chicago	State IL	Zip Code 60660										
FEC ID number of contributing federal political committee. C		Transaction ID : SA11AI.4704										
Name of Employer (for Individual) Self-employed		Amount of Each Receipt this Period										
Occupation (for Individual) Production Manager		5000.00										
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="checkbox"/> Memo Item Conduit: ActBlue										
5000.00												

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C.		Date of Receipt										
Mailing Address		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y					
M M M	/	D D D	/	Y Y Y Y Y Y								
City	State	Zip Code										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period										
Name of Employer (for Individual)		<input type="checkbox"/> Memo Item										
Occupation (for Individual)												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼											

SUBTOTAL of Receipts This Page (optional).....	10000.00
TOTAL This Period (last page this line number only).....	19500.00

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

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

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

Mailing Address P.O. BOX 441146

City SOMERVILLE	State MA	Zip Code 02144
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FEC ID number of contributing federal political committee. **C** C00401224

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2018

Transaction ID : SA11C.4728

Amount of Each Receipt this Period

16500.00

Memo Item
Total Received Through Conduit This Reporting Period

B. Air Line Pilots Association PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1625 Massachusetts Ave., NW

City Washington	State DC	Zip Code 20036
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FEC ID number of contributing federal political committee. **C** C00035451

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
10		12		2018

Transaction ID : SA11C.4701

Amount of Each Receipt this Period

2500.00

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

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Memo Item

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL 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)
PROGRESSIVE CHOICES PAC

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 10 / 07 / 2018	
Mailing Address 366 Summer Street		FEC Identification Number C [] Transaction ID : SB21B.4711 Amount of Each Disbursement this Period [] 454.25	
City Somerville	State MA	Zip Code 02144	Category/ Type []
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. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 10 / 14 / 2018	
Mailing Address 366 Summer Street		FEC Identification Number C [] Transaction ID : SB21B.4712 Amount of Each Disbursement this Period [] 197.50	
City Somerville	State MA	Zip Code 02144	Category/ Type []
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) C. AT&T		Date of Disbursement MM / DD / YYYY 10 / 04 / 2018	
Mailing Address 208 Akard Street		FEC Identification Number C [] Transaction ID : SB21B.4710 Amount of Each Disbursement this Period [] 29.94	
City Dallas	State TX	Zip Code 75202	Category/ Type []
Purpose of Disbursement Telephone and Internet		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:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 681.69
TOTAL This Period (last page this line number only).....▶	[] 681.69

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
PROGRESSIVE CHOICES PAC

A. ANDY KIM FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 211

City MARLTON State NJ Zip Code 08053

Purpose of Disbursement Contribution

Candidate Name **KIM, ANDY, , ,**

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: NJ District: 03

Date of Disbursement: 10 / 16 / 2018

FEC Identification Number: **C00648220**
Transaction ID : **SB23.4718**
Amount of Each Disbursement this Period: 1000.00

Memo Item

B. BRENDAN KELLY VICTORY FUND

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 736

City BELLEVILLE State IL Zip Code 62222

Purpose of Disbursement Contribution

Candidate Name **KELLY, BRENDAN, , ,**

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: IL District: 12

Date of Disbursement: 10 / 04 / 2018

FEC Identification Number: **C00687467**
Transaction ID : **SB23.4715**
Amount of Each Disbursement this Period: 1000.00

Memo Item

C. FINKENAUER FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 598

City DUBUQUE State IA Zip Code 52004

Purpose of Disbursement Contribution

Candidate Name **FINKENAUER, ABBY, , ,**

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: IA District: 01

Date of Disbursement: 10 / 16 / 2018

FEC Identification Number: **C00637074**
Transaction ID : **SB23.4717**
Amount of Each Disbursement this Period: 1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3000.00

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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
PROGRESSIVE CHOICES PAC

Full Name (Last, First, Middle Initial) A. HEIDI FOR SENATE		Date of Disbursement MM / DD / YYYY 10 / 16 / 2018
Mailing Address PO BOX 1577		FEC Identification Number C00505552 Transaction ID : SB23.4721
City BISMARCK	State ND	Zip Code 58502
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name HEITKAMP, HEIDI, , ,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: ND	District: 00	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. KRISTEN CARLSON FOR CONGRESS COMMITTEE		Date of Disbursement MM / DD / YYYY 10 / 16 / 2018
Mailing Address 125 N KENTUCKY AVE STE. 301		FEC Identification Number C00677096 Transaction ID : SB23.4720
City LAKELAND	State FL	Zip Code 33801
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name CARLSON, KRISTEN, , ,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: FL	District: 15	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. MCCASKILL FOR MISSOURI		Date of Disbursement MM / DD / YYYY 10 / 16 / 2018
Mailing Address PO BOX 300077		FEC Identification Number C00431304 Transaction ID : SB23.4724
City ST LOUIS	State MO	Zip Code 63130
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name MCCASKILL, CLAIRE, , ,		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MO	District: 00	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	3000.00
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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
PROGRESSIVE CHOICES PAC

Full Name (Last, First, Middle Initial) A. NEVADANS FOR STEVEN HORSFORD		Date of Disbursement M M / D D / Y Y Y Y Y Y 10 / 16 / 2018	
Mailing Address PO BOX 336664			
City NORTH LAS VEGAS	State NV	Zip Code 89033	
Purpose of Disbursement Contribution		FEC Identification Number C C00668228	
Candidate Name HORSFORD, STEVEN ALEXZANDER, , ,		Transaction ID : SB23.4719 Amount of Each Disbursement this Period 1000.00	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: NV District: 04	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y Y Y	
Mailing Address			
City	State	Zip Code	
Purpose of Disbursement		FEC Identification Number C	
Candidate Name		Amount of Each Disbursement this Period	
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) C.		Date of Disbursement M M / D D / Y Y Y Y Y Y	
Mailing Address			
City	State	Zip Code	
Purpose of Disbursement		FEC Identification Number C	
Candidate Name		Amount of Each Disbursement this Period	
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		

SUBTOTAL of Disbursements This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	7000.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
PROGRESSIVE CHOICES PAC

A. Moran, Catherine, A., ,

Full Name (Last, First, Middle Initial)

Mailing Address 4713 N. LaPorte

City Chicago State IL Zip Code 60630

Purpose of Disbursement Contribution Refund

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 10 / 17 / 2018

FEC Identification Number C

Transaction ID : SB28A.4727

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

Disbursement For: Primary General Other (specify) ▼

State: District:

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

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

FEC Identification Number C

Amount of Each Disbursement this Period

Memo Item

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