

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.

ColorOfChange PAC

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

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

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- | | | | |
|--------------------------------------|---|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input checked="" type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on / / in the State of

- (d) 30-Day POST-Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on / / in the State of

5. Covering Period / / through / /

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

Savado, Ismael, , ,

Type or Print Name of Treasurer

Signature of Treasurer *Savado, Ismael, , ,* [Electronically Filed] Date / /

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

Office Use Only									
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

ColorOfChange 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="2019"/>		<input type="text" value="924467.57"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="773288.83"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="10778.41"/>	<input type="text" value="146044.50"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="784067.24"/>	<input type="text" value="1070512.07"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="28102.61"/>	<input type="text" value="314547.44"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="75964.63"/>	<input type="text" value="75964.63"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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

ColorOfChange PAC

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	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 Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	0.00	0.00
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.).....	10778.41	146044.50
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)).....▶	10778.41	146044.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	10778.41	146044.50

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	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
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).....	28102.61	314547.44
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)) ..	28102.61	314547.44
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	28102.61	314547.44

DETAILED SUMMARY PAGE
of Disbursements

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

**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 6 OF 21
<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

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)
ColorOfChange PAC

A. Bandler, Willa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 555 Winter St
 City Walpole State MA Zip Code 02081-1006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) None Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **04 / 11 / 2019**
Transaction ID : VTQZWH5VCB6
 Amount of Each Receipt this Period 100.00
 Memo Item
 Non-Contribution Account

B. Bloom, Matthew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 149 Congress St
 City Brooklyn State NY Zip Code 11201-6103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WSMS Occupation (for Individual) Administration
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **04 / 29 / 2019**
Transaction ID : VTQZWH5V3R0
 Amount of Each Receipt this Period 100.00
 Memo Item
 Non-Contribution Account

C. Haas, Colleen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 69 Crecienta Dr
 City Sausalito State CA Zip Code 94965-1882
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) None Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **04 / 29 / 2019**
Transaction ID : VTQZWH5V538
 Amount of Each Receipt this Period 100.00
 Memo Item
 Non-Contribution Account

SUBTOTAL of Receipts This Page (optional).....	300.00
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 21
<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)
ColorOfChange PAC

A. Jones, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3473 S King Dr # 421
 City Chicago State IL Zip Code 60616-4108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Consultant
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 400.00

Date of Receipt **04 / 26 / 2019**
Transaction ID : VTQZWHSV6Y4
 Amount of Each Receipt this Period 100.00
 Memo Item
 Non-Contribution Account

B. Leigh, Simone, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 Montgomery St # 2B
 City Brooklyn State NY Zip Code 11225-2008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Visual Artist
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 600.00

Date of Receipt **04 / 05 / 2019**
Transaction ID : VTQZWHSTX08
 Amount of Each Receipt this Period 100.00
 Memo Item
 Non-Contribution Account

C. Leigh, Simone, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 Montgomery St # 2B
 City Brooklyn State NY Zip Code 11225-2008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Visual Artist
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 600.00

Date of Receipt **04 / 11 / 2019**
Transaction ID : VTQZWHSDVP6
 Amount of Each Receipt this Period 50.00
 Memo Item
 Non-Contribution Account

SUBTOTAL of Receipts This Page (optional).....	250.00
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 8 OF 21
<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)
ColorOfChange PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Nigra, Louis, , ,			Date of Receipt
Mailing Address 200 W Grand Ave Apt 1202			<input type="text" value="04"/> / <input type="text" value="05"/> / <input type="text" value="2019"/>
City Chicago	State IL	Zip Code 60654-4476	Transaction ID : VTQZWHSTWB2
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="10.00"/>
Name of Employer (for Individual) None		Occupation (for Individual) Not Employed	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="240.00"/>		Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Nigra, Louis, , ,			Date of Receipt
Mailing Address 200 W Grand Ave Apt 1202			<input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2019"/>
City Chicago	State IL	Zip Code 60654-4476	Transaction ID : VTQZWHSTWB2
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="15.00"/>
Name of Employer (for Individual) None		Occupation (for Individual) Not Employed	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="240.00"/>		Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Nigra, Louis, , ,			Date of Receipt
Mailing Address 200 W Grand Ave Apt 1202			<input type="text" value="04"/> / <input type="text" value="26"/> / <input type="text" value="2019"/>
City Chicago	State IL	Zip Code 60654-4476	Transaction ID : VTQZWHSTWB2
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="35.00"/>
Name of Employer (for Individual) None		Occupation (for Individual) Not Employed	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="240.00"/>		Non-Contribution Account

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="60.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

**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 21
<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)
ColorOfChange PAC

A. Rubin, Todd, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 Santa Monica Blvd
 Ste 480
 City Santa Monica State CA Zip Code 90401-2266
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Investor
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt **04 / 05 / 2019**
Transaction ID : VTQZWHSTWN1
 Amount of Each Receipt this Period 25.00
 Memo Item
 Non-Contribution Account

B. Rubin, Todd, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 Santa Monica Blvd
 Ste 480
 City Santa Monica State CA Zip Code 90401-2266
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Investor
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt **04 / 11 / 2019**
Transaction ID : VTQZWHSDVT8
 Amount of Each Receipt this Period 25.00
 Memo Item
 Non-Contribution Account

C. Rubin, Todd, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 Santa Monica Blvd
 Ste 480
 City Santa Monica State CA Zip Code 90401-2266
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Investor
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt **04 / 26 / 2019**
Transaction ID : VTQZWHSDVAW7
 Amount of Each Receipt this Period 15.00
 Memo Item
 Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ▶ 65.00
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 10 OF 21
<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)
ColorOfChange PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Schwartz, Miriam, , ,			Date of Receipt MM / DD / YYYY 04 / 26 / 2019
Mailing Address 333 Great River Rd Apt 409			Transaction ID : VTQZWHSV2Z2
City Somerville	State MA	Zip Code 02145-1222	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) None		Occupation (for Individual) Not Employed	Non-Contribution Account
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Soffer, Jill, , ,			Date of Receipt MM / DD / YYYY 04 / 26 / 2019
Mailing Address 561 Spring Park Ranch Rd			Transaction ID : VTQZWHSV0Z9
City Carbondale	State CO	Zip Code 81623-9118	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) None		Occupation (for Individual) Not Employed	Non-Contribution Account
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. SP Plus Corp			Date of Receipt MM / DD / YYYY 04 / 05 / 2019
Mailing Address 200 E Randolph St Ste 7700			Transaction ID : VTQZWHSEXJ3
City Chicago	State IL	Zip Code 60601-7702	Amount of Each Receipt this Period 600.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual)		Occupation (for Individual)	Refund, Non-Contribution Account
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 600.00		

SUBTOTAL of Receipts This Page (optional).....	950.00
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 11 OF 21
<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)
ColorOfChange PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Spencer, Orlando, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 26 / 2019
Mailing Address 10957 River Falls Dr		Transaction ID : VTQZWHSDA0
City Jacksonville	State FL	Zip Code 32219-5138
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1200.00
Name of Employer (for Individual) Self-Employed	Occupation (for Individual) Landlord	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	Refund, Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Sullivan, Mark, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 05 / 2019
Mailing Address 2635 Russell St		Transaction ID : VTQZWHSV9R3
City Berkeley	State CA	Zip Code 94705-2131
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) Self-Employed	Occupation (for Individual) Psychotherapist	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Thompson, Mark, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 05 / 2019
Mailing Address 22006 E Lost Lake Rd		Transaction ID : VTQZWHSTX81
City Snohomish	State WA	Zip Code 98296-3929
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 72.00
Name of Employer (for Individual) None	Occupation (for Individual) Not Employed	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 288.00	Non-Contribution Account

SUBTOTAL of Receipts This Page (optional).....▶	1372.00
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 12 OF 21
<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)
ColorOfChange PAC

A. Tobey, Eugene, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 278 Forts Ferry Rd
 City Latham State NY Zip Code 12110-1209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) None Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **04 / 29 / 2019**
Transaction ID : VTQZWHSV038
 Amount of Each Receipt this Period 50.00
 Memo Item
 Non-Contribution Account

B. Warden Properties
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 159 Laurel Bluffs Drive
 City Hazelwood State MO Zip Code 63042
 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 ▼ 1000.00

Date of Receipt **04 / 26 / 2019**
Transaction ID : VTQZWHSEK3
 Amount of Each Receipt this Period 1000.00
 Memo Item
 Refund, Non-Contribution Account

C. Williams, Bradley, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1714 Franklin St
 City Oakland State CA Zip Code 94612-3488
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ColorOfChange Occupation (for Individual) Information Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 603.52

Date of Receipt **04 / 26 / 2019**
Transaction ID : VTQZWHSTRH1
 Amount of Each Receipt this Period 303.52
 Memo Item
 Refund, Non-Contribution Account

SUBTOTAL of Receipts This Page (optional).....	1353.52
TOTAL This Period (last page this line number only).....	4350.52

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
ColorOfChange PAC

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 04 / 05 / 2019	
Mailing Address PO Box 382110		FEC Identification Number C [REDACTED] Transaction ID : VTQ0M9WGE	
City Cambridge	State MA	Zip Code 02238-2110	Amount of Each Disbursement this Period 91.88
Purpose of Disbursement Credit Card Processing Fees		Category/ Type	Non-Contribution Account
Candidate Name		<input type="checkbox"/> Memo Item	
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. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 04 / 11 / 2019	
Mailing Address PO Box 382110		FEC Identification Number C [REDACTED] Transaction ID : VTQ0M9WGD	
City Cambridge	State MA	Zip Code 02238-2110	Amount of Each Disbursement this Period 56.70
Purpose of Disbursement Credit Card Processing Fees		Category/ Type	Non-Contribution Account
Candidate Name		<input type="checkbox"/> Memo Item	
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) C. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 04 / 26 / 2019	
Mailing Address PO Box 382110		FEC Identification Number C [REDACTED] Transaction ID : VTQ0M9WGT	
City Cambridge	State MA	Zip Code 02238-2110	Amount of Each Disbursement this Period 84.99
Purpose of Disbursement Credit Card Processing Fees		Category/ Type	Non-Contribution Account
Candidate Name		<input type="checkbox"/> Memo Item	
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)..... ▶

233.57

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 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)
ColorOfChange PAC

A. ActBlue Technical Services

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

Purpose of Disbursement Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 04 / 29 / 2019

FEC Identification Number: C

Transaction ID : VTQ0M9WGC

Amount of Each Disbursement this Period: 71.37

Memo Item

B. Amuzie, Charles, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1714 Franklin St

City Oakland State CA Zip Code 94612-3488

Purpose of Disbursement Salary

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 04 / 15 / 2019

FEC Identification Number: C

Transaction ID : VTQ0M9WGC

Amount of Each Disbursement this Period: 9.02

Memo Item

C. AT&T

Full Name (Last, First, Middle Initial)

Mailing Address 32 Avenue Of The Americas

City New York State NY Zip Code 10013-2473

Purpose of Disbursement Telecommunications Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 04 / 15 / 2019

FEC Identification Number: C

Transaction ID : VTQ0M9WGC

Amount of Each Disbursement this Period: 1031.32

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1111.71

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 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)
ColorOfChange PAC

Full Name (Last, First, Middle Initial) A. AT&T		Date of Disbursement MM / DD / YYYY 04 / 29 / 2019
Mailing Address 32 Avenue Of The Americas		FEC Identification Number C [] Transaction ID : VTQ0M9WGC Amount of Each Disbursement this Period [] 992.18 Non-Contribution Account <input type="checkbox"/> Memo Item
City New York	State NY	Zip Code 10013-2473
Purpose of Disbursement Telecommunications 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:		

Full Name (Last, First, Middle Initial) B. ColorOfChange.org		Date of Disbursement MM / DD / YYYY 04 / 15 / 2019
Mailing Address 1714 Franklin St # 100-136		FEC Identification Number C [] Transaction ID : VTQ0M9WGD Amount of Each Disbursement this Period [] 429.91 Non-Contribution Account <input type="checkbox"/> Memo Item
City Oakland	State CA	Zip Code 94612-3488
Purpose of Disbursement Payroll Taxes and Service 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:		

Full Name (Last, First, Middle Initial) C. Delta Airlines		Date of Disbursement MM / DD / YYYY 04 / 16 / 2019
Mailing Address 1030 Delta Blvd		FEC Identification Number C [] Transaction ID : VTQ0M9WGT Amount of Each Disbursement this Period [] 491.00 * Non-Contribution Account <input checked="" type="checkbox"/> Memo Item
City Atlanta	State GA	Zip Code 30354-1989
Purpose of Disbursement PEX Card - Travel, See Payment from 11/5/18		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:		

SUBTOTAL of Disbursements This Page (optional).....▶	[] 1422.09
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 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)
ColorOfChange PAC

A. Ghost Note Agency

Full Name (Last, First, Middle Initial)

Mailing Address 1342 Florida Ave NW

City Washington State DC Zip Code 20009-4808

Purpose of Disbursement Graphic Design Services

Candidate Name

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

State: District:

Date of Disbursement: 04 / 09 / 2019

FEC Identification Number: C

Transaction ID : VTQ0M9WGC

Amount of Each Disbursement this Period: 1461.00

Memo Item

B. Goodman, Keith, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1714 Franklin St # 100-136

City Oakland State CA Zip Code 94612-3488

Purpose of Disbursement Strategic Consulting Services

Candidate Name

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

State: District:

Date of Disbursement: 04 / 19 / 2019

FEC Identification Number: C

Transaction ID : VTQ0M9WGC

Amount of Each Disbursement this Period: 2450.00

Memo Item

C. Hatch, Arisha, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1714 Franklin St

City Oakland State CA Zip Code 94612-3488

Purpose of Disbursement Salary

Candidate Name

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

State: District:

Date of Disbursement: 04 / 15 / 2019

FEC Identification Number: C

Transaction ID : VTQ0M9WGC

Amount of Each Disbursement this Period: 4377.36

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 8288.36

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 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)
ColorOfChange PAC

Full Name (Last, First, Middle Initial) A. Hinton, Danita, , ,			Date of Disbursement MM / DD / YYYY 04 / 15 / 2019	
Mailing Address 1714 Franklin St Ste 136			FEC Identification Number C	
City Oakland	State CA	Zip Code 94612-3409	Transaction ID : VTQ0M9WGE	
Purpose of Disbursement Salary			Amount of Each Disbursement this Period 86.54	
Candidate Name			Non-Contribution Account <input type="checkbox"/> Memo Item	
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. Lebin Yates Consulting			Date of Disbursement MM / DD / YYYY 04 / 23 / 2019	
Mailing Address PO Box 41112			FEC Identification Number C	
City Austin	State TX	Zip Code 78704-0019	Transaction ID : VTQ0M9WGC	
Purpose of Disbursement Compliance Services			Amount of Each Disbursement this Period 291.25	
Candidate Name			Non-Contribution Account <input type="checkbox"/> Memo Item	
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) C. NGP VAN			Date of Disbursement MM / DD / YYYY 04 / 02 / 2019	
Mailing Address PO Box 392264			FEC Identification Number C	
City Pittsburgh	State PA	Zip Code 15251-9264	Transaction ID : VTQ0M9WGC	
Purpose of Disbursement Software and Support			Amount of Each Disbursement this Period 625.00	
Candidate Name			Non-Contribution Account <input type="checkbox"/> Memo Item	
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).....▶	1002.79
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 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)
ColorOfChange PAC

Full Name (Last, First, Middle Initial) A. Olson Hagel & Fishburn, LLP		Date of Disbursement MM / DD / YYYY 04 / 10 / 2019
Mailing Address 555 Capitol Mall Ste 400		FEC Identification Number C [REDACTED] Transaction ID : VTQ0M9WGC Amount of Each Disbursement this Period 41.30
City Sacramento	State CA	Zip Code 95814-4503
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 Non-Contribution Account	

Full Name (Last, First, Middle Initial) B. QuickBase		Date of Disbursement MM / DD / YYYY 04 / 22 / 2019
Mailing Address 2632 Marine Way		FEC Identification Number C [REDACTED] Transaction ID : VTQ0M9WGC Amount of Each Disbursement this Period 725.00
City Mountain View	State CA	Zip Code 94043-1126
Purpose of Disbursement 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 Non-Contribution Account	

Full Name (Last, First, Middle Initial) C. Ross, Reagan, , ,		Date of Disbursement MM / DD / YYYY 04 / 15 / 2019
Mailing Address 1714 Franklin St Ste 100-136		FEC Identification Number C [REDACTED] Transaction ID : VTQ0M9WGT Amount of Each Disbursement this Period 449.48
City Oakland	State CA	Zip Code 94612-3488
Purpose of Disbursement Salary		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 Non-Contribution Account	

SUBTOTAL of Disbursements This Page (optional).....▶	1215.78
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 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)
ColorOfChange PAC

Full Name (Last, First, Middle Initial) A. Sandler, Reiff, Lamb, Rosenstein & Birkenstock, PC		Date of Disbursement M M / D D / Y Y Y Y Y Y 04 / 10 / 2019	
Mailing Address 1090 Vermont Ave NW Ste 750		FEC Identification Number C [] Transaction ID : VTQ0M9WGC Amount of Each Disbursement this Period [] 240.00 Non-Contribution Account <input type="checkbox"/> Memo Item	
City Washington State DC Zip Code 20005-4970	Purpose of Disbursement Legal Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type []
Full Name (Last, First, Middle Initial) B. Savadogo, Ismael, , ,		Date of Disbursement M M / D D / Y Y Y Y Y Y 04 / 15 / 2019	
Mailing Address 1714 Franklin St Ste 100-136		FEC Identification Number C [] Transaction ID : VTQ0M9WGD Amount of Each Disbursement this Period [] 497.58 Non-Contribution Account <input type="checkbox"/> Memo Item	
City Oakland State CA Zip Code 94612-3488	Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type []
Full Name (Last, First, Middle Initial) C. Shabazz, Rashid, , ,		Date of Disbursement M M / D D / Y Y Y Y Y Y 04 / 15 / 2019	
Mailing Address 1714 Franklin St		FEC Identification Number C [] Transaction ID : VTQ0M9WGT Amount of Each Disbursement this Period [] 576.88 Non-Contribution Account <input type="checkbox"/> Memo Item	
City Oakland State CA Zip Code 94612-3488	Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type []
SUBTOTAL of Disbursements This Page (optional)..... ▶		[] 1314.46	
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 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)
ColorOfChange PAC

Full Name (Last, First, Middle Initial) A. Stanton, Chad, , ,			Date of Disbursement MM / DD / YYYY 04 / 15 / 2019	
Mailing Address 1714 Franklin St # 100-136			FEC Identification Number C [REDACTED] Transaction ID : VTQ0M9WGC Amount of Each Disbursement this Period 675.40	
City Oakland	State CA	Zip Code 94612-3488	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Salary		Category/ Type [REDACTED]	Non-Contribution Account <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. The Movement Cooperative			Date of Disbursement MM / DD / YYYY 04 / 16 / 2019	
Mailing Address 200 Schermerhorn St			FEC Identification Number C [REDACTED] Transaction ID : VTQ0M9WGC Amount of Each Disbursement this Period 9125.00	
City Brooklyn	State NY	Zip Code 11201-5889	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Strategic Consulting Management		Category/ Type [REDACTED]	Non-Contribution Account <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) C. Verizon Wireless			Date of Disbursement MM / DD / YYYY 04 / 09 / 2019	
Mailing Address 1 Verizon Way			FEC Identification Number C [REDACTED] Transaction ID : VTQ0M9WGC Amount of Each Disbursement this Period 310.80	
City Basking Ridge	State NJ	Zip Code 07920-1097	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Telecommunications Services		Category/ Type [REDACTED]	Non-Contribution Account <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:				

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

10111.20

TOTAL 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 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)
ColorOfChange PAC

Full Name (Last, First, Middle Initial) A. WillDolt Apparel		Date of Disbursement MM / DD / YYYY 04 / 05 / 2019
Mailing Address 850 Cesery Blvd Ste 5		FEC Identification Number C Transaction ID : VTQ0M9WGC Amount of Each Disbursement this Period 2782.00 Non-Contribution Account <input type="checkbox"/> Memo Item
City Jacksonville	State FL Zip Code 32211-5677	
Purpose of Disbursement T-Shirts		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:		

Full Name (Last, First, Middle Initial) B. Williams, James, , ,		Date of Disbursement MM / DD / YYYY 04 / 15 / 2019
Mailing Address 1714 Franklin St		FEC Identification Number C Transaction ID : VTQ0M9WGD Amount of Each Disbursement this Period 605.70 Non-Contribution Account <input type="checkbox"/> Memo Item
City Oakland	State CA Zip Code 94612-3488	
Purpose of Disbursement Salary		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:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement		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) ▼	Memo Item <input type="checkbox"/>
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	3387.70
TOTAL This Period (last page this line number only).....▶	28087.66