

**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 Victory PAC

ADDRESS (number and street)

PO Box 40411

Check if different
than previously
reported. (ACC)

Arlington

VA

22204

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00821348

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

(b) Monthly
Report
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☒ Aug 20 (M8) ☐ Nov 20 (M11)
(Non-Election
Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)
(Non-Election
Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

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

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

Election on

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

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

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

Election on

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

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
07 01 2024

through

M M M / D D D / Y Y Y Y Y Y
07 31 2024

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

Type or Print Name of Treasurer

Drzymala, Samuel, , ,

Signature of Treasurer

Drzymala, Samuel, , ,

Date

M M M / D D D / Y Y Y Y Y Y
08 20 2024

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**FEC FORM 3X**
Rev. 05/2016

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Progressive Victory PAC

Report Covering the Period:

From:

MM / DD / YYYY
07 / 01 / 2024

To:

MM / DD / YYYY
07 / 31 / 2024

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2024		68543.08
(b) Cash on Hand at Beginning of Reporting Period.....	63387.52	
(c) Total Receipts (from Line 19)	53113.50	113685.19
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	116501.02	182228.27
7. Total Disbursements (from Line 31)	54063.79	119791.04
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	62437.23	62437.23
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)	7070.10	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Progressive Victory PAC

Report Covering the Period:

From:

M M / D D / Y Y Y Y
07 01 2024

To:

M M / D D / Y Y Y Y
07 31 2024**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).....

2225.00

35997.96

(ii) Unitemized

888.50

27687.23

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

3113.50

63685.19

(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)

3113.50

63685.19

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.).....

50000.00

50000.00

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))

53113.50

113685.19

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

53113.50

113685.19

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	8471.48	11489.81
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	8471.48	11489.81
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)	7070.09	48003.79
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	25.00
(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	25.00
29. Other Disbursements (Including Non-Federal Donations).....	38522.22	60272.44
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)) ..	54063.79	119791.04
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	54063.79	119791.04

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)	3113.50	63685.19
34. Total Contribution Refunds (from Line 28(d))	0.00	25.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3113.50	63660.19
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	8471.48	11489.81
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	8471.48	11489.81

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 30

(check only one)

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

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 Victory PAC

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

A. Davis, Marshall, , ,

Mailing Address 203 N Auburndale St

City
MemphisState
TNZip Code
38112-5307FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EagleBurgmannOccupation (for Individual)
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 07 / 2024

Transaction ID : 17221198

Amount of Each Receipt this Period

100.00

☐ Memo Item

* Earmarked Contribution: See Below

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

B. ACTBLUE

Mailing Address PO Box 441146

City
West SomervilleState
MAZip Code
02144-0031FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer (for Individual)

Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3113.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 07 / 2024

Transaction ID : 17221198E

Amount of Each Receipt this Period

100.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

C. Flores, Ilias, , ,

Mailing Address 706 N Santa Fe St

City
Pauls ValleyState
OKZip Code
73075-2418FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WalmartOccupation (for Individual)
Retail worker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 07 / 2024

Transaction ID : 17221196

Amount of Each Receipt this Period

10.00

☐ Memo Item

* Earmarked Contribution: See Below

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

110.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 7 OF 30
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Progressive Victory PAC

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

A. ACTBLUE

Mailing Address PO Box 441146

City
West SomervilleState
MAZip Code
02144-0031FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer (for Individual)

Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3113.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 07 / 2024

Transaction ID : 17221196E

Amount of Each Receipt this Period

10.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

B. Flores, Ilias, , ,

Mailing Address 706 N Santa Fe St

City
Pauls ValleyState
OKZip Code
73075-2418FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WalmartOccupation (for Individual)
Retail worker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 21 / 2024

Transaction ID : 17333293

Amount of Each Receipt this Period

25.00

☐ Memo Item

* Earmarked Contribution: See Below

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

C. ACTBLUE

Mailing Address PO Box 441146

City
West SomervilleState
MAZip Code
02144-0031FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer (for Individual)

Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3113.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 21 / 2024

Transaction ID : 17333293E

Amount of Each Receipt this Period

25.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional)..... ►

25.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 8 OF 30
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Progressive Victory PAC

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

A. Hake, Nathaniel, , ,

Mailing Address 3327 Zuni St

City
DenverState
COZip Code
80211-3357FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
SelfOccupation (for Individual)
Travel Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 21 / 2024**Transaction ID : 17333296**

Amount of Each Receipt this Period

500.00

☐ Memo Item

* Earmarked Contribution: See Below

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

B. ACTBLUE

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing
federal political committee.**C** C00401224

Name of Employer (for Individual)

Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3113.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 21 / 2024**Transaction ID : 17333296E**

Amount of Each Receipt this Period

500.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

C. Kupsik, Jakob, , ,

Mailing Address 1904 N Ukiah Way

City

Upland

State

CA

Zip Code

91784-1620

FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Not EmployedOccupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2024**Transaction ID : 17400241**

Amount of Each Receipt this Period

100.00

☐ Memo Item

* Earmarked Contribution: See Below

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

600.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 9 OF 30
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Progressive Victory PAC

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

A. ACTBLUE

Mailing Address PO Box 441146

City
West SomervilleState
MAZip Code
02144-0031FEC ID number of contributing
federal political committee.**C** C00401224

Name of Employer (for Individual)

Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3113.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 31 / 2024**Transaction ID : 17400241E**

Amount of Each Receipt this Period

100.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

B. Litts, Timothy, , ,

Mailing Address 19554 3rd Ave NW

City
ShorelineState
WAZip Code
98177-2521FEC ID number of contributing
federal political committee.**C**

Name of Employer (for Individual)

PayPal

Occupation (for Individual)
Workforce Planning Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 07 / 2024**Transaction ID : 17221192**

Amount of Each Receipt this Period

50.00

☐ Memo Item

* Earmarked Contribution: See Below

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

C. ACTBLUE

Mailing Address PO Box 441146

City
West SomervilleState
MAZip Code
02144-0031FEC ID number of contributing
federal political committee.**C** C00401224

Name of Employer (for Individual)

Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3113.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 07 / 2024**Transaction ID : 17221192E**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

50.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 10 OF 30
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Progressive Victory PAC

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

A. Richter, Alex, , ,

Mailing Address 5796 E 280th St

City
Elko New MarketState
MNZip Code
55020-9404FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
McLaneOccupation (for Individual)
Receiving Assistant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 07 / 2024**Transaction ID : 17221193**

Amount of Each Receipt this Period

100.00

☐ Memo Item

* Earmarked Contribution: See Below

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

B. ACTBLUE

Mailing Address PO Box 441146

City
West SomervilleState
MAZip Code
02144-0031FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer (for Individual)

Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3113.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 07 / 2024**Transaction ID : 17221193E**

Amount of Each Receipt this Period

100.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

C. Spiniolas, Ryan, , ,

Mailing Address 705 E Whispering Oaks Dr

City
PalatineState
ILZip Code
60074-2354FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Northrop Grumman CorporationOccupation (for Individual)
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 07 / 2024**Transaction ID : 17221197**

Amount of Each Receipt this Period

50.00

☐ Memo Item

* Earmarked Contribution: See Below

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

150.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 11 OF 30
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Progressive Victory PAC

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

A. ACTBLUE

Mailing Address PO Box 441146

City
West SomervilleState
MAZip Code
02144-0031FEC ID number of contributing
federal political committee.**C** C00401224

Name of Employer (for Individual)

Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3113.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 07 / 2024**Transaction ID : 17221197E**

Amount of Each Receipt this Period

50.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

B. Tocci, Lynda, , ,

Mailing Address 99 Oxford St

City
ArlingtonState
MAZip Code
02474-6907FEC ID number of contributing
federal political committee.**C**

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 21 / 2024**Transaction ID : 17333286**

Amount of Each Receipt this Period

250.00

☐ Memo Item

* Earmarked Contribution: See Below

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

C. ACTBLUE

Mailing Address PO Box 441146

City
West SomervilleState
MAZip Code
02144-0031FEC ID number of contributing
federal political committee.**C** C00401224

Name of Employer (for Individual)

Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3113.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 21 / 2024**Transaction ID : 17333286E**

Amount of Each Receipt this Period

250.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

250.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 12 OF 30
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Progressive Victory PAC

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

A. Whouley, Michael, , ,

Mailing Address 208 Centre St

City
DanversState
MAZip Code
01923-1341FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Dewey square groupOccupation (for Individual)
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 21 / 2024**Transaction ID : 17333284**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

* Earmarked Contribution: See Below

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

B. ACTBLUE

Mailing Address PO Box 441146

City
West SomervilleState
MAZip Code
02144-0031FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer (for Individual)

Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3113.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 21 / 2024**Transaction ID : 17333284E**

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

C. Zahn, Timothy, , ,

Mailing Address 757 Sightly Rd

City
ToutleState
WAZip Code
98649-9746FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CompucomOccupation (for Individual)
IT Associate

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

399.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 21 / 2024**Transaction ID : 17333295**

Amount of Each Receipt this Period

40.00

☐ Memo Item

* Earmarked Contribution: See Below

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

1040.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 13 OF 30
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Progressive Victory PAC

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

A. ACTBLUE

Mailing Address PO Box 441146

City
West SomervilleState
MAZip Code
02144-0031FEC ID number of contributing
federal political committee.**C** C00401224

Name of Employer (for Individual)

Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3113.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 21 / 2024**Transaction ID : 17333295E**

Amount of Each Receipt this Period

40.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

B.

Mailing Address

City

State

Zip Code

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

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

C.

Mailing Address

City

State

Zip Code

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

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

2225.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 14 OF 30
(check only one)

<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)

Progressive Victory PAC

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

A. Gilmore, Elizabeth, , ,

Mailing Address 462 Mountain View Dr

City
ColumbusState
NCZip Code
28722-4457FEC ID number of contributing
federal political committee.

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Pet Sitter

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
07		24		2024

Transaction ID : 17405647

Amount of Each Receipt this Period

☐ Memo Item

Non-Contribution Account

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

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

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

Amount of Each Receipt this Period

☐ Memo Item

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

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

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

Amount of Each Receipt this Period

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 30

<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 Victory PAC

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address 366 Summer St

City
SomervilleState
MAZip Code
02144-3132

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) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	7		2	0	2	4		

FEC Identification Number

C**Transaction ID : 500075739**

Amount of Each Disbursement this Period

16.89

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address 366 Summer St

City
SomervilleState
MAZip Code
02144-3132

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) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	4		2	0	2	4		

FEC Identification Number

C**Transaction ID : 500077090**

Amount of Each Disbursement this Period

9.16

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address 366 Summer St

City
SomervilleState
MAZip Code
02144-3132

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) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	1		2	0	2	4		

FEC Identification Number

C**Transaction ID : 500077091**

Amount of Each Disbursement this Period

76.29

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

102.34

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 30

<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 Victory PAC

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address 366 Summer St

City
SomervilleState
MAZip Code
02144-3132

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) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	8			2	0	2	4	

FEC Identification Number

C**Transaction ID : 500077092**

Amount of Each Disbursement this Period

15.26

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address 366 Summer St

City
SomervilleState
MAZip Code
02144-3132

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) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	2	4	

FEC Identification Number

C**Transaction ID : 500077590**

Amount of Each Disbursement this Period

5.64

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. JotFormMailing Address 4 Embarcadero Ctr
Ste 780City
San FranciscoState
CAZip Code
94111-4102

Purpose of Disbursement

Subscriptions

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:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	5			2	0	2	4	

FEC Identification Number

C**Transaction ID : 500077595**

Amount of Each Disbursement this Period

49.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

69.90

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 30

<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 Victory PAC

Full Name (Last, First, Middle Initial)

A. Ramp

Mailing Address 28 W 23rd St

City
New YorkState
NYZip Code
10010-5204

Purpose of Disbursement

Reimbursement --itemized below

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	6			2	0	2	4		

FEC Identification Number

C

Transaction ID : 500078094

Amount of Each Disbursement this Period

8000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Amazon

Mailing Address 410 Terry Ave N

City
SeattleState
WAZip Code
98109-5210

Purpose of Disbursement

Non-contribution account - Canvassing supplies and materials

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	6			2	0	2	4		

FEC Identification Number

C

Transaction ID : 500078101

Amount of Each Disbursement this Period

1513.49

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. American Airlines

Mailing Address 1 Skyview Dr

City
Fort WorthState
TXZip Code
76155-1801

Purpose of Disbursement

Non-contribution account - Airfare

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	6			2	0	2	4		

FEC Identification Number

C

Transaction ID : 500078096

Amount of Each Disbursement this Period

433.95

☒ Memo Item

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

8000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 19 OF 30

<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 Victory PAC

Full Name (Last, First, Middle Initial)

A. Target

Mailing Address 6480 Sky Pointe Dr

City
Las VegasState
NVZip Code
89131-4038

Purpose of Disbursement

Non-contribution account - Canvassing supplies and materials

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	6			2	0	2	4		

FEC Identification Number

C

Transaction ID : 500078093

Amount of Each Disbursement this Period

633.63

☒ Memo Item ***B. U-Haul**

Full Name (Last, First, Middle Initial)

Mailing Address 1900 S Decatur Blvd

City
Las VegasState
NVZip Code
89102-8500

Purpose of Disbursement

Non-contribution account - Moving expenses

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	6			2	0	2	4		

FEC Identification Number

C

Transaction ID : 500078092

Amount of Each Disbursement this Period

437.85

☒ Memo Item ***C. Walmart**

Full Name (Last, First, Middle Initial)

Mailing Address 8060 W Tropical Pkwy

City
Las VegasState
NVZip Code
89149-4528

Purpose of Disbursement

Non-contribution account - Canvassing supplies and materials

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	6			2	0	2	4		

FEC Identification Number

C

Transaction ID : 500078098

Amount of Each Disbursement this Period

1299.73

☒ Memo Item ***SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0	0	0											

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 30

<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 Victory PAC

Full Name (Last, First, Middle Initial)

A. Ramp

Mailing Address 28 W 23rd St

City
New YorkState
NYZip Code
10010-5204

Purpose of Disbursement

Reimbursement -- itemized below

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	2			2	0	2	4		

FEC Identification Number

C

Transaction ID : 500078103

Amount of Each Disbursement this Period

286.40

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Amazon

Mailing Address 410 Terry Ave N

City
SeattleState
WAZip Code
98109-5210

Purpose of Disbursement

Non-contribution account - Canvassing supplies and materials

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	2			2	0	2	4		

FEC Identification Number

C

Transaction ID : 500078106

Amount of Each Disbursement this Period

13.34

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Target

Mailing Address 6480 Sky Pointe Dr

City
Las VegasState
NVZip Code
89131-4038

Purpose of Disbursement

Non-contribution account - Canvassing supplies and materials

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	2			2	0	2	4		

FEC Identification Number

C

Transaction ID : 500078102

Amount of Each Disbursement this Period

63.77

☒ Memo Item

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

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

286.40

8458.64

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 21 OF 30

<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)

Progressive Victory PAC

Full Name (Last, First, Middle Initial)

A. Avallone, Hunter, , ,Mailing Address 253 N Queen St
Apt 2BCity
MartinsburgState
WVZip Code
25401-3354

Purpose of Disbursement

Non-Contribution Account - Digital Advertising

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	0			2	0	2	4		

FEC Identification Number

C**Transaction ID : 500077640**

Amount of Each Disbursement this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Bryant, Alexander, , ,

Mailing Address 1209 Laurel Oak Trl

City
PflugervilleState
TXZip Code
78660-3428

Purpose of Disbursement

Non-Contribution Account - Digital Advertising

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	0			2	0	2	4		

FEC Identification Number

C**Transaction ID : 500077635**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Burns, Dylan, , ,

Mailing Address 9510 49th Pl

City
College ParkState
MDZip Code
20740-1645

Purpose of Disbursement

Non-Contribution Account - Digital Advertising

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	0			2	0	2	4		

FEC Identification Number

C**Transaction ID : 500077637**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

5000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 22 OF 30

<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)

Progressive Victory PAC

Full Name (Last, First, Middle Initial)

A. Cohen, Guy, , ,Mailing Address 489 Dawson Ave
Apt CCity
Long BeachState
CAZip Code
90814-3884

Purpose of Disbursement

Non-Contribution Account - Digital Advertising

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	0			2	0	2	4		

FEC Identification Number

C**Transaction ID : 500077638**

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Deering, Conor, , ,

Mailing Address 1801 Windsor Dr

City
Winter ParkState
FLZip Code
32789-2770

Purpose of Disbursement

Non-Contribution Account - Digital Advertising

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	0			2	0	2	4		

FEC Identification Number

C**Transaction ID : 500077677**

Amount of Each Disbursement this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. EBERLIN, JESSIAH, , ,

Mailing Address 5113 Milton Belt Rd

City
CharlotteState
NCZip Code
28217-3764

Purpose of Disbursement

Non-Contribution Account - Digital Advertising

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	0			2	0	2	4		

FEC Identification Number

C**Transaction ID : 500077642**

Amount of Each Disbursement this Period

2000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 23 OF 30

<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)

Progressive Victory PAC

Full Name (Last, First, Middle Initial)

A. Fudge, Howard, , ,

Mailing Address 39 Birch St

City
AnnvilleState
PAZip Code
17003-9557

Purpose of Disbursement

Non-Contribution Account - Digital Advertising

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	0			2	0	2	4		

FEC Identification Number

C**Transaction ID : 500077639**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Global Realty and Management Inc.

Mailing Address 1611 S Maryland Pkwy

City
Las VegasState
NVZip Code
89104-3312

Purpose of Disbursement

Non-Contribution Account - Rent

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	2			2	0	2	4		

FEC Identification Number

C**Transaction ID : 500077114**

Amount of Each Disbursement this Period

2533.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Haley, Alexander, , ,

Mailing Address 2855 S Orcas St

City
SeattleState
WAZip Code
98108-3067

Purpose of Disbursement

Non-Contribution Account - Digital Advertising

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	0			2	0	2	4		

FEC Identification Number

C**Transaction ID : 500077636**

Amount of Each Disbursement this Period

2000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5533.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 24 OF 30

<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)

Progressive Victory PAC

Full Name (Last, First, Middle Initial)

A. hutchinson, shaun, , ,

Mailing Address 121 N 3rd St

City
AlhambraState
CAZip Code
91801-3493

Purpose of Disbursement

Non-Contribution Account - Digital Advertising

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	0			2	0	2	4		

FEC Identification Number

C

Transaction ID : 500077643

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Khattar, Nicole Yvonne, , ,

Mailing Address 4595 Sandridge St

City
ObetzState
OHZip Code
43207-4598

Purpose of Disbursement

Non-Contribution Account - Strategic Consulting Services

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	0			2	0	2	4		

FEC Identification Number

C

Transaction ID : 500077119

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Lortie, Teikou, , ,

Mailing Address 55 S Potomac St
Apt 302City
HagerstownState
MDZip Code
21740-5537

Purpose of Disbursement

Non-Contribution Account - Reimbursement - itemized below

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	9			2	0	2	4		

FEC Identification Number

C

Transaction ID : 500077121

Amount of Each Disbursement this Period

350.09

☐ Memo Item

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

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

3350.09

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 25 OF 30

<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)

Progressive Victory PAC

Full Name (Last, First, Middle Initial)

A. Amtrak

Mailing Address 1 Massachusetts Ave NW

City
WashingtonState
DCZip Code
20001-1401

Purpose of Disbursement

Train

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	9			2	0	2	4		

FEC Identification Number

C**Transaction ID : 500077694**

Amount of Each Disbursement this Period

198.00

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Lortie, Teikou, , ,Mailing Address 55 S Potomac St
Apt 302City
HagerstownState
MDZip Code
21740-5537

Purpose of Disbursement

Non-Contribution Account - Digital Advertising

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	0			2	0	2	4		

FEC Identification Number

C**Transaction ID : 500077678**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. North Star Properties of NC Inc.Mailing Address 4170 Clemmons Rd
Ste 281City
ClemmonsState
NCZip Code
27012-7520

Purpose of Disbursement

Non-Contribution Account - Rent

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	0			2	0	2	4		

FEC Identification Number

C**Transaction ID : 500077116**

Amount of Each Disbursement this Period

2195.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3195.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 26 OF 30

<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)

Progressive Victory PAC

Full Name (Last, First, Middle Initial)

A. Swans Realty & Property Management

Mailing Address 1425 W Elliot Rd

City
GilbertState
AZZip Code
85233-5129

Purpose of Disbursement

Non-Contribution Account - Rent

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:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	2			2	0	2	4	

FEC Identification Number

C**Transaction ID : 500077599**

Amount of Each Disbursement this Period

2680.64

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Triamond Realty LLC

Mailing Address 1530 S 6th St

City
PhiladelphiaState
PAZip Code
19147-6547

Purpose of Disbursement

Non-Contribution Account - Rent

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:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	2			2	0	2	4	

FEC Identification Number

C**Transaction ID : 500077117**

Amount of Each Disbursement this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Triamond Realty LLC

Mailing Address 1530 S 6th St

City
PhiladelphiaState
PAZip Code
19147-6547

Purpose of Disbursement

Non-Contribution Account - Rent

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:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	5			2	0	2	4	

FEC Identification Number

C**Transaction ID : 500077632**

Amount of Each Disbursement this Period

3000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

8680.64

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 27 OF 30

<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)

Progressive Victory PAC

Full Name (Last, First, Middle Initial)

A. Triamond Realty LLC

Mailing Address 1530 S 6th St

City
PhiladelphiaState
PAZip Code
19147-6547

Purpose of Disbursement

Non-Contribution Account - Rent

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	6			2	0	2	4		

FEC Identification Number

C

Transaction ID : 500077118

Amount of Each Disbursement this Period

140.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Triamond Realty LLC

Mailing Address 1530 S 6th St

City
PhiladelphiaState
PAZip Code
19147-6547

Purpose of Disbursement

Non-Contribution Account - Rent

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	5			2	0	2	4		

FEC Identification Number

C

Transaction ID : 500077633

Amount of Each Disbursement this Period

3056.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Williams-DeBolt, Jared, , ,

Mailing Address 7436 Tanyard Knoll Ln

City
Glen BurnieState
MDZip Code
21060-8636

Purpose of Disbursement

Non-Contribution Account - Digital Advertising

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:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	0			2	0	2	4		

FEC Identification Number

C

Transaction ID : 500077641

Amount of Each Disbursement this Period

500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3696.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 28 OF 30

<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)

Progressive Victory PAC

Full Name (Last, First, Middle Initial)

A. Younes, Nassif, , ,

Mailing Address 66 Rosemount Place

City
Aberdeen CityState
GBZip Code
AB252XJ

Purpose of Disbursement

Non-Contribution Account - Digital Advertising

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M					D	D					Y	Y	Y	Y	Y	Y
0	7					1	0					2	0	2	4		

FEC Identification Number

C

Transaction ID : 500077598

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

State:

District:

Date of Disbursement

M	M					D	D					Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M					D	D					Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

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

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

2000.00

38454.73

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 29 OF 30

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Progressive Victory PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Tahir, Bilal, , ,

Nature of Debt (Purpose):

Non-contribution account - Strategic
Consulting and Travel

Mailing Address 52 Astor Pl

City
Jersey CityState
NJZip Code
07304-2943

Outstanding Balance Beginning This Period

14140.19

Transaction ID : 1250000079

Amount Incurred This Period

0.00

Payment This Period

7070.09

Outstanding Balance at Close of This Period

7070.10

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

7070.10

2) **TOTALS** This Period (last page this line number only)..... ►

7070.10

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

7070.10

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 30 OF 30
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Progressive Victory PAC		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;">CC00821348</div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: flex; justify-content: space-around; width: 100%;"><div><div style="border: 1px solid black; padding: 2px; text-align: center;">M M</div> / <div style="border: 1px solid black; padding: 2px; text-align: center;">D D</div> / <div style="border: 1px solid black; padding: 2px; text-align: center;">Y Y Y Y Y Y</div></div></div>			
Full Name of Payee Tahir, Bilal, , , <div style="text-align: right;"><input type="checkbox"/> Memo Item</div>		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"><div><div style="border: 1px solid black; padding: 2px; text-align: center;">M M</div>06</div> / <div><div style="border: 1px solid black; padding: 2px; text-align: center;">D D</div>22</div> / <div><div style="border: 1px solid black; padding: 2px; text-align: center;">Y Y Y Y Y Y</div>2024</div></div>	
Mailing Address 52 Astor Pl		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">7070.09</div>	
<div style="flex: 1;">City Jersey City</div> <div style="flex: 1;">State NJ</div> <div style="flex: 1;">Zip Code 07304-2943</div>			
Purpose of Expenditure Non-contribution account - Strategic Consulting		Transaction ID : 500077689 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"><div><div style="border: 1px solid black; padding: 2px; text-align: center;">M M</div>07</div> / <div><div style="border: 1px solid black; padding: 2px; text-align: center;">D D</div>30</div> / <div><div style="border: 1px solid black; padding: 2px; text-align: center;">Y Y Y Y Y Y</div>2024</div></div>	
Name of Federal Candidate: BOWMAN, JAMAAL, , ,		Office Sought: <input checked="" type="checkbox"/> House District: 16 <div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> President <input type="checkbox"/> Senate State: NY</div></div>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">55073.89</div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> Other (specify) ▶</div></div>	
Full Name of Payee <div style="text-align: right;"><input type="checkbox"/> Memo Item</div>		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"><div><div style="border: 1px solid black; padding: 2px; text-align: center;">M M</div></div> / <div><div style="border: 1px solid black; padding: 2px; text-align: center;">D D</div></div> / <div><div style="border: 1px solid black; padding: 2px; text-align: center;">Y Y Y Y Y Y</div></div></div>	
Mailing Address		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"></div>	
<div style="flex: 1;">City</div> <div style="flex: 1;">State</div> <div style="flex: 1;">Zip Code</div>			
Purpose of Expenditure		Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"><div><div style="border: 1px solid black; padding: 2px; text-align: center;">M M</div></div> / <div><div style="border: 1px solid black; padding: 2px; text-align: center;">D D</div></div> / <div><div style="border: 1px solid black; padding: 2px; text-align: center;">Y Y Y Y Y Y</div></div></div>	
Name of Federal Candidate:		Office Sought: <input type="checkbox"/> House District: _____ <div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> President <input type="checkbox"/> Senate State: _____</div></div>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"></div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> Other (specify) ▶</div></div>	

(a) SUBTOTAL of Itemized Independent Expenditures

7070.09

(b) SUBTOTAL of Unitemized Independent Expenditures.....

(c) TOTAL Independent Expenditures

7070.09

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Drzymala, Samuel, , ,

Signature

Date

M M

08

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D D

20

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Y Y Y Y Y Y

2024

FEC Schedule E (Form 3X) Rev. 05/2016