

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

VOTE IN THE BLUE WAVE

ADDRESS (number and street) 10507 ALMAYO AVE.

Check if different than previously reported. (ACC) LOS ANGELES CA 90064

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

C C00683151

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 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 M M / D D / Y Y Y Y Y Y in the State of

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

Election on M M / D D / Y Y Y Y Y Y in the State of CA

5. Covering Period M M / D D / Y Y Y Y Y Y 10 / 01 / 2018 through M M / D D / Y Y Y Y Y Y 11 / 26 / 2018

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

Smith, Marsha, , ,

Type or Print Name of Treasurer _____

Signature of Treasurer Smith, Marsha, , , [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 12 / 03 / 2018

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

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

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

VOTE IN THE BLUE WAVE

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="7015.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="228.00"/>	<input type="text" value="7443.00"/>
(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="7243.00"/>	<input type="text" value="7443.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="7007.61"/>	<input type="text" value="7207.61"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="235.39"/>	<input type="text" value="235.39"/>
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

VOTE IN THE BLUE WAVE

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).....	200.00	3280.00
(ii) Unitemized	28.00	4163.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	228.00	7443.00
(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)	228.00	7443.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	228.00	7443.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	228.00	7443.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	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.....	6400.00	6600.00
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).....	607.61	607.61
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)) ..	7007.61	7207.61
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7007.61	7207.61

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)	228.00	7443.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	228.00	7443.00
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: PAGE 6 OF 19
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
VOTE IN THE BLUE WAVE

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

Mailing Address 10507 Almayo Ave

City LA State CA Zip Code 90064

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

Name of Employer (for Individual) Trevor Meberry Occupation (for Individual) Dental Hygienist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2018

Transaction ID : SA11AI.4238

Amount of Each Receipt this Period
200.00

Memo Item

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

Mailing Address

City State Zip Code

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	200.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
VOTE IN THE BLUE WAVE

Full Name (Last, First, Middle Initial) A. CAMPA-NAJJAR, AMMAR, , ,		Date of Disbursement MM / DD / YYYY 10 / 01 / 2018	
Mailing Address 14533 OLIVE VISTA DRIVE		FEC Identification Number C H8CA50098 Transaction ID : SB23.4250 Amount of Each Disbursement this Period 100.00	
City JAMUL	State CA	Zip Code 91935	Category/ Type
Purpose of Disbursement Contribution			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CA District: 50	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. CAMPA-NAJJAR, AMMAR, , ,		Date of Disbursement MM / DD / YYYY 10 / 06 / 2018	
Mailing Address 14533 OLIVE VISTA DRIVE		FEC Identification Number C H8CA50098 Transaction ID : SB23.4252 Amount of Each Disbursement this Period 250.00	
City JAMUL	State CA	Zip Code 91935	Category/ Type
Purpose of Disbursement			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CA District: 50	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. CAMPA-NAJJAR, AMMAR, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018	
Mailing Address 14533 OLIVE VISTA DRIVE		FEC Identification Number C H8CA50098 Transaction ID : SB23.4254 Amount of Each Disbursement this Period 50.00	
City JAMUL	State CA	Zip Code 91935	Category/ Type
Purpose of Disbursement			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CA District: 50	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
VOTE IN THE BLUE WAVE

Full Name (Last, First, Middle Initial) A. CAMPA-NAJJAR, AMMAR, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018
Mailing Address 14533 OLIVE VISTA DRIVE		FEC Identification Number C H8CA50098 Transaction ID : SB23.4255 Amount of Each Disbursement this Period 150.00
City JAMUL	State CA	Zip Code 91935
Purpose of Disbursement		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: CA District: 50		

Full Name (Last, First, Middle Initial) B. CAMPA-NAJJAR, AMMAR, , ,		Date of Disbursement MM / DD / YYYY 10 / 21 / 2018
Mailing Address 14533 OLIVE VISTA DRIVE		FEC Identification Number C H8CA50098 Transaction ID : SB23.4256 Amount of Each Disbursement this Period 250.00
City JAMUL	State CA	Zip Code 91935
Purpose of Disbursement		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: CA District: 50		

Full Name (Last, First, Middle Initial) C. CISNEROS, GILBERT, , ,		Date of Disbursement MM / DD / YYYY 10 / 01 / 2018
Mailing Address 10880 WILSHIRE BLVD. SUITE 2100		FEC Identification Number C H8CA39174 Transaction ID : SB23.4261 Amount of Each Disbursement this Period 250.00
City LOS ANGELES	State CA	Zip Code 90024
Purpose of Disbursement		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: CA District: 39		

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

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

650.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
VOTE IN THE BLUE WAVE

A. CISNEROS, GILBERT, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 10880 WILSHIRE BLVD.
SUITE 2100

City LOS ANGELES State CA Zip Code 90024

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: CA District: 39

Disbursement For: 2018
 Primary General Other (specify) ▼

Date of Disbursement: 10 / 10 / 2018

FEC Identification Number: C H8CA39174
Transaction ID : SB23.4262
Amount of Each Disbursement this Period: 100.00

Memo Item

B. CISNEROS, GILBERT, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 10880 WILSHIRE BLVD.
SUITE 2100

City LOS ANGELES State CA Zip Code 90024

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: CA District: 39

Disbursement For: 2018
 Primary General Other (specify) ▼

Date of Disbursement: 10 / 15 / 2018

FEC Identification Number: C H8CA39174
Transaction ID : SB23.4263
Amount of Each Disbursement this Period: 250.00

Memo Item

C. COX, TJ, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 804

City SELMA State CA Zip Code 93662

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: CA District: 21

Disbursement For: 2018
 Primary General Other (specify) ▼

Date of Disbursement: 10 / 01 / 2018

FEC Identification Number: C H6CA19113
Transaction ID : SB23.4286
Amount of Each Disbursement this Period: 250.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 600.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
VOTE IN THE BLUE WAVE

Full Name (Last, First, Middle Initial) A. COX, TJ, , ,		Date of Disbursement MM / DD / YYYY 10 / 01 / 2018
Mailing Address PO BOX 804		FEC Identification Number C H6CA19113 Transaction ID : SB23.4287 Amount of Each Disbursement this Period 100.00
City SELMA	State CA	
Zip Code 93662	Purpose of Disbursement	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA	District: 21	

Full Name (Last, First, Middle Initial) B. COX, TJ, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018
Mailing Address PO BOX 804		FEC Identification Number C H6CA19113 Transaction ID : SB23.4288 Amount of Each Disbursement this Period 250.00
City SELMA	State CA	
Zip Code 93662	Purpose of Disbursement	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA	District: 21	

Full Name (Last, First, Middle Initial) C. HARDER, JOSH, , ,		Date of Disbursement MM / DD / YYYY 10 / 01 / 2018
Mailing Address P.O. BOX 4426		FEC Identification Number C H8CA10126 Transaction ID : SB23.4271 Amount of Each Disbursement this Period 250.00
City MODESTO	State CA	
Zip Code 95352	Purpose of Disbursement	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA	District: 10	

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

600.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
VOTE IN THE BLUE WAVE

A. HARDER, JOSH, , ,

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 4426

City **MODESTO** State **CA** Zip Code **95352**

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: **CA** District: **10**

Disbursement For: 2018
 Primary General
 Other (specify) ▼

Date of Disbursement: **10 / 10 / 2018**

FEC Identification Number: **C H8CA10126**
Transaction ID : SB23.4272
Amount of Each Disbursement this Period: **250.00**

Memo Item

B. HARDER, JOSH, , ,

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 4426

City **MODESTO** State **CA** Zip Code **95352**

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: **CA** District: **10**

Disbursement For: 2018
 Primary General
 Other (specify) ▼

Date of Disbursement: **10 / 15 / 2018**

FEC Identification Number: **C H8CA10126**
Transaction ID : SB23.4266
Amount of Each Disbursement this Period: **250.00**

Memo Item

C. HARDER, JOSH, , ,

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 4426

City **MODESTO** State **CA** Zip Code **95352**

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: **CA** District: **10**

Disbursement For: 2018
 Primary General
 Other (specify) ▼

Date of Disbursement: **10 / 21 / 2018**

FEC Identification Number: **C H8CA10126**
Transaction ID : SB23.4274
Amount of Each Disbursement this Period: **150.00**

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ **650.00**

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
VOTE IN THE BLUE WAVE

A. HILL, KATHERINE LAUREN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 8923 HIERBA ROAD

City AGUA DULCE State CA Zip Code 91390

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: CA District: 25

Date of Disbursement: 10 / 01 / 2018

FEC Identification Number: C H8CA25074

Transaction ID : SB23.4276

Amount of Each Disbursement this Period: 250.00

Memo Item

B. HILL, KATHERINE LAUREN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 8923 HIERBA ROAD

City AGUA DULCE State CA Zip Code 91390

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: CA District: 25

Date of Disbursement: 10 / 10 / 2018

FEC Identification Number: C H8CA25074

Transaction ID : SB23.4277

Amount of Each Disbursement this Period: 250.00

Memo Item

C. HILL, KATHERINE LAUREN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 8923 HIERBA ROAD

City AGUA DULCE State CA Zip Code 91390

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: CA District: 25

Date of Disbursement: 10 / 15 / 2018

FEC Identification Number: C H8CA25074

Transaction ID : SB23.4278

Amount of Each Disbursement this Period: 250.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 750.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
VOTE IN THE BLUE WAVE

Full Name (Last, First, Middle Initial) A. HILL, KATHERINE LAUREN, , ,		Date of Disbursement MM / DD / YYYY 10 / 21 / 2018
Mailing Address 8923 HIERBA ROAD		FEC Identification Number C H8CA25074 Transaction ID : SB23.4279
City AGUA DULCE	State CA	Zip Code 91390
Purpose of Disbursement	Candidate Name	Amount of Each Disbursement this Period 150.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: CA	District: 25	

Full Name (Last, First, Middle Initial) B. JANZ, ANDREW, , ,		Date of Disbursement MM / DD / YYYY 10 / 01 / 2018
Mailing Address 16633 VENTURA BLVD., #1008		FEC Identification Number C H8CA22139 Transaction ID : SB23.4258
City ENCINO	State CA	Zip Code 91436
Purpose of Disbursement	Candidate Name	Amount of Each Disbursement this Period 100.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item
State: CA	District: 22	

Full Name (Last, First, Middle Initial) C. JANZ, ANDREW, , ,		Date of Disbursement MM / DD / YYYY 10 / 10 / 2018
Mailing Address 16633 VENTURA BLVD., #1008		FEC Identification Number C H8CA22139 Transaction ID : SB23.4259
City ENCINO	State CA	Zip Code 91436
Purpose of Disbursement	Candidate Name	Amount of Each Disbursement this Period 150.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: CA	District: 22	

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

400.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
VOTE IN THE BLUE WAVE

A. JANZ, ANDREW, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 16633 VENTURA BLVD., #1008

City ENCINO State CA Zip Code 91436

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: CA District: 22

Date of Disbursement: 10 / 15 / 2018

FEC Identification Number: C H8CA22139

Transaction ID : SB23.4260

Amount of Each Disbursement this Period: 100.00

Memo Item

B. LEVIN, MIKE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3605 LONG BEACH BLVD., SUITE 426

City LONG BEACH State CA Zip Code 90807

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: CA District: 49

Date of Disbursement: 10 / 01 / 2018

FEC Identification Number: C H8CA49058

Transaction ID : SB23.4284

Amount of Each Disbursement this Period: 250.00

Memo Item

C. LEVIN, MIKE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3605 LONG BEACH BLVD., SUITE 426

City LONG BEACH State CA Zip Code 90807

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: CA District: 49

Date of Disbursement: 10 / 15 / 2018

FEC Identification Number: C H8CA49058

Transaction ID : SB23.4285

Amount of Each Disbursement this Period: 100.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 450.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
VOTE IN THE BLUE WAVE

A. PORTER, KATHERINE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 777 S. FIGUEROA ST., SUITE 4050

City LOS ANGELES State CA Zip Code 90017

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: CA District: 45

Date of Disbursement: 10 / 01 / 2018

FEC Identification Number: C H8CA45130

Transaction ID : SB23.4280

Amount of Each Disbursement this Period: 150.00

Memo Item

B. PORTER, KATHERINE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 777 S. FIGUEROA ST., SUITE 4050

City LOS ANGELES State CA Zip Code 90017

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: CA District: 45

Date of Disbursement: 10 / 10 / 2018

FEC Identification Number: C H8CA45130

Transaction ID : SB23.4281

Amount of Each Disbursement this Period: 100.00

Memo Item

C. PORTER, KATHERINE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 777 S. FIGUEROA ST., SUITE 4050

City LOS ANGELES State CA Zip Code 90017

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: CA District: 45

Date of Disbursement: 10 / 15 / 2018

FEC Identification Number: C H8CA45130

Transaction ID : SB23.4282

Amount of Each Disbursement this Period: 250.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
VOTE IN THE BLUE WAVE

Full Name (Last, First, Middle Initial) A. PORTER, KATHERINE, , ,		Date of Disbursement MM / DD / YYYY 10 / 21 / 2018	
Mailing Address 777 S. FIGUEROA ST., SUITE 4050		FEC Identification Number C H8CA45130 Transaction ID : SB23.4283	
City LOS ANGELES	State CA	Zip Code 90017	Amount of Each Disbursement this Period 250.00
Purpose of Disbursement		Category/Type	Memo Item <input type="checkbox"/>
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: CA District: 45		Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. ROSEN, JACKY, , ,		Date of Disbursement MM / DD / YYYY 10 / 24 / 2018	
Mailing Address 1000 N GREEN VALLEY PKWY #440-177		FEC Identification Number C H6NV03139 Transaction ID : SB23.4305	
City HENDERSON	State NV	Zip Code 89074	Amount of Each Disbursement this Period 50.00
Purpose of Disbursement		Category/Type	Memo Item <input type="checkbox"/>
Candidate Name		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: NV District: 03		Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. ROUDA, HARLEY E JR, , ,		Date of Disbursement MM / DD / YYYY 10 / 01 / 2018	
Mailing Address 120 NEWPORT CENTER DR # 28		FEC Identification Number C H8CA48035 Transaction ID : SB23.4264	
City NEWPORT BEACH	State CA	Zip Code 92660	Amount of Each Disbursement this Period 150.00
Purpose of Disbursement		Category/Type	Memo Item <input type="checkbox"/>
Candidate Name		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: CA District: 48		Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

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

450.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
VOTE IN THE BLUE WAVE

Full Name (Last, First, Middle Initial) A. ROUDA, HARLEY E JR, , ,		Date of Disbursement MM / DD / YYYY 10 / 06 / 2018
Mailing Address 120 NEWPORT CENTER DR # 28		FEC Identification Number C H8CA48035 Transaction ID : SB23.4265
City NEWPORT BEACH	State CA	Zip Code 92660
Purpose of Disbursement	Candidate Name	Amount of Each Disbursement this Period 100.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: CA District: 48	Category/Type	

Full Name (Last, First, Middle Initial) B. ROUDA, HARLEY E JR, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2018
Mailing Address 120 NEWPORT CENTER DR # 28		FEC Identification Number C H8CA48035 Transaction ID : SB23.4290
City NEWPORT BEACH	State CA	Zip Code 92660
Purpose of Disbursement	Candidate Name	Amount of Each Disbursement this Period 250.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: CA District: 48	Category/Type	

Full Name (Last, First, Middle Initial) C. ROUDA, HARLEY E JR, , ,		Date of Disbursement MM / DD / YYYY 10 / 21 / 2018
Mailing Address 120 NEWPORT CENTER DR # 28		FEC Identification Number C H8CA48035 Transaction ID : SB23.4267
City NEWPORT BEACH	State CA	Zip Code 92660
Purpose of Disbursement	Candidate Name	Amount of Each Disbursement this Period 250.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: CA District: 48	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	6400.00

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

Use separate schedule(s)
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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)
VOTE IN THE BLUE WAVE

A. Smith, Marsha, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 10507 Almayo Ave

City LA State CA Zip Code 90064

Purpose of Disbursement
Filing fees, Publications, Software for FEC filing, Banking Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2018
 Primary General
 Other (specify) ▼

Category/Type

Date of Disbursement: 10 / 26 / 2018

FEC Identification Number: C

Transaction ID : SB29.4309

Amount of Each Disbursement this Period: 607.61

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General
 Other (specify)

Category/Type

Date of Disbursement

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Category/Type

Date of Disbursement

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	607.61
TOTAL This Period (last page this line number only).....▶	607.61