

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**
YOUTH PROGRESSIVE ACTION CATALYST

ADDRESS (number and street) **1250 I STREET NW**
SUITE 330
 Check if different than previously reported. (ACC) **WASHINGTON DC 20005**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00670216 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period / / 2021 through / / 2021

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

Signature of Treasurer **Guthman, Nick, , ,** [Electronically Filed] Date / / 2022

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

YOUTH PROGRESSIVE ACTION CATALYST

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2021"/>	<input type="text" value="130109.18"/>	<input type="text" value="130109.18"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="51353.42"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="138479.16"/>	<input type="text" value="273527.03"/>
(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="189832.58"/>	<input type="text" value="403636.21"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="152269.27"/>	<input type="text" value="366072.90"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="37563.31"/>	<input type="text" value="37563.31"/>
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

YOUTH PROGRESSIVE ACTION CATALYST

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).....	40436.92	66533.50
(ii) Unitemized	96535.84	200742.67
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	136972.76	267276.17
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	1500.00	1500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	138472.76	268776.17
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	2735.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	6.40	2015.86
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)).....▶	138479.16	273527.03
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	138479.16	273527.03

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	144958.34	355411.48
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	144958.34	355411.48
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	4660.00	4660.00
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).....	2650.93	6001.42
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)) ..	152269.27	366072.90
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	152269.27	366072.90

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)	138472.76	268776.17
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	138472.76	268776.17
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	144958.34	355411.48
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	2735.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	144958.34	352676.48

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 191
	<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)
YOUTH PROGRESSIVE ACTION CATALYST

A. Albu, Emily, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1413 Arena Drive
 City Davis State CA Zip Code 95618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) University of California Occupation (for Individual) Classics professor emerita
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 287.00

Date of Receipt **07 / 11 / 2021**
Transaction ID : SA11AI.27122
 Amount of Each Receipt this Period 38.00
 Memo Item

B. Albu, Emily, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1413 Arena Drive
 City Davis State CA Zip Code 95618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) University of California Occupation (for Individual) Classics professor emerita
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00

Date of Receipt **08 / 10 / 2021**
Transaction ID : SA11AI.27123
 Amount of Each Receipt this Period 38.00
 Memo Item

C. Albu, Emily, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1413 Arena Drive
 City Davis State CA Zip Code 95618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) University of California Occupation (for Individual) Classics professor emerita
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 365.00

Date of Receipt **08 / 14 / 2021**
Transaction ID : SA11AI.27124
 Amount of Each Receipt this Period 40.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	116.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 191
<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

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Albu, Emily, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1413 Arena Drive
 City Davis State CA Zip Code 95618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) University of California Occupation (for Individual) Classics professor emerita
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 383.00

Date of Receipt 08 / 29 / 2021
Transaction ID : SA11AI.27125
 Amount of Each Receipt this Period 18.00
 Memo Item

B. Albu, Emily, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1413 Arena Drive
 City Davis State CA Zip Code 95618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) University of California Occupation (for Individual) Classics professor emerita
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 408.00

Date of Receipt 10 / 17 / 2021
Transaction ID : SA11AI.27126
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Anderson, Samuel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 159 Viburnum Way
 City Carrboro State NC Zip Code 27510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) not employed Occupation (for Individual) Homemaker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 07 / 27 / 2021
Transaction ID : SA11AI.27144
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	63.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Anderson, Samuel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 159 Viburnum Way
 City Carrboro State NC Zip Code 27510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) not employed Occupation (for Individual) Homemaker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 08 / 08 / 2021
Transaction ID : SA11AI.27145
 Amount of Each Receipt this Period 35.00
 Memo Item

B. Anderson, Samuel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 159 Viburnum Way
 City Carrboro State NC Zip Code 27510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) not employed Occupation (for Individual) Homemaker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 555.00

Date of Receipt 08 / 15 / 2021
Transaction ID : SA11AI.27146
 Amount of Each Receipt this Period 300.00
 Memo Item

C. Anderson, Samuel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 159 Viburnum Way
 City Carrboro State NC Zip Code 27510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) not employed Occupation (for Individual) Homemaker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 08 / 27 / 2021
Transaction ID : SA11AI.27147
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	355.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Anderson, Samuel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 159 Viburnum Way
 City Carrboro State NC Zip Code 27510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) not employed Occupation (for Individual) Homemaker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 610.00

Date of Receipt 09 / 08 / 2021
Transaction ID : SA11AI.27148
 Amount of Each Receipt this Period 35.00
 Memo Item

B. Anderson, Samuel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 159 Viburnum Way
 City Carrboro State NC Zip Code 27510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) not employed Occupation (for Individual) Homemaker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 630.00

Date of Receipt 09 / 27 / 2021
Transaction ID : SA11AI.27149
 Amount of Each Receipt this Period 20.00
 Memo Item

C. Anderson, Samuel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 159 Viburnum Way
 City Carrboro State NC Zip Code 27510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) not employed Occupation (for Individual) Homemaker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 665.00

Date of Receipt 10 / 08 / 2021
Transaction ID : SA11AI.27150
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	90.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 191
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Anderson, Samuel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 159 Viburnum Way
 City Carrboro State NC Zip Code 27510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) not employed Occupation (for Individual) Homemaker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 685.00

Date of Receipt 10 / 27 / 2021
Transaction ID : SA11AI.27151
 Amount of Each Receipt this Period 20.00
 Memo Item

B. Anderson, Samuel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 159 Viburnum Way
 City Carrboro State NC Zip Code 27510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) not employed Occupation (for Individual) Homemaker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 730.00

Date of Receipt 10 / 30 / 2021
Transaction ID : SA11AI.27152
 Amount of Each Receipt this Period 45.00
 Memo Item

C. Anderson, Samuel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 159 Viburnum Way
 City Carrboro State NC Zip Code 27510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) not employed Occupation (for Individual) Homemaker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 765.00

Date of Receipt 11 / 08 / 2021
Transaction ID : SA11AI.27153
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 191
	<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	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Anderson, Samuel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 159 Viburnum Way
 City Carrboro State NC Zip Code 27510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) not employed Occupation (for Individual) Homemaker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 785.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 27 / 2021
Transaction ID : SA11AI.27154
 Amount of Each Receipt this Period
 20.00
 Memo Item

B. Anderson, Samuel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 159 Viburnum Way
 City Carrboro State NC Zip Code 27510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) not employed Occupation (for Individual) Homemaker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 820.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2021
Transaction ID : SA11AI.27155
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. Anderson, Samuel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 159 Viburnum Way
 City Carrboro State NC Zip Code 27510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) not employed Occupation (for Individual) Homemaker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 840.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2021
Transaction ID : SA11AI.27156
 Amount of Each Receipt this Period
 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Armstrong, Mary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7205 Norwood Pond Court
 City Midlothian State VA Zip Code 23112
 FEC 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 ▼ 220.00

Date of Receipt 07 / 08 / 2021
Transaction ID : SA11AI.27165
 Amount of Each Receipt this Period 20.00
 Memo Item

B. Armstrong, Mary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7205 Norwood Pond Court
 City Midlothian State VA Zip Code 23112
 FEC 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 ▼ 240.00

Date of Receipt 07 / 23 / 2021
Transaction ID : SA11AI.27166
 Amount of Each Receipt this Period 20.00
 Memo Item

C. Atwood, Jeff, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 410 Clayton Avenue
 City El Cerrito State CA Zip Code 94530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self-employed Occupation (for Individual) programmer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt 10 / 24 / 2021
Transaction ID : SA11AI.27175
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 90.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Atwood, Jeff, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 410 Clayton Avenue
 City El Cerrito State CA Zip Code 94530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self-employed Occupation (for Individual) programmer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 10 / 31 / 2021
Transaction ID : SA11AI.27176
 Amount of Each Receipt this Period 45.00
 Memo Item

B. Atwood, Jeff, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 410 Clayton Avenue
 City El Cerrito State CA Zip Code 94530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self-employed Occupation (for Individual) programmer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 11 / 14 / 2021
Transaction ID : SA11AI.27177
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Atwood, Jeff, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 410 Clayton Avenue
 City El Cerrito State CA Zip Code 94530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self-employed Occupation (for Individual) programmer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 11 / 21 / 2021
Transaction ID : SA11AI.27178
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	145.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Atwood, Jeff, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 410 Clayton Avenue
 City El Cerrito State CA Zip Code 94530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self-employed Occupation (for Individual) programmer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 12 / 01 / 2021
Transaction ID : SA11AI.27179
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Atwood, Jeff, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 410 Clayton Avenue
 City El Cerrito State CA Zip Code 94530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self-employed Occupation (for Individual) programmer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 12 / 21 / 2021
Transaction ID : SA11AI.27180
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Audritsh, Charlie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12442 Springbrooke Run
 City Carmel State IN Zip Code 46033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Salesforce Occupation (for Individual) Software dev
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 09 / 05 / 2021
Transaction ID : SA11AI.27186
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address 107 Garland Road

City Newton	State MA	Zip Code 02459
----------------	-------------	-------------------

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

Name of Employer (for Individual) self	Occupation (for Individual) architect
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
248.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2021

Transaction ID : SA11AI.27212

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 107 Garland Road

City Newton	State MA	Zip Code 02459
----------------	-------------	-------------------

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

Name of Employer (for Individual) self	Occupation (for Individual) architect
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
298.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2021

Transaction ID : SA11AI.27213

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 107 Garland Road

City Newton	State MA	Zip Code 02459
----------------	-------------	-------------------

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

Name of Employer (for Individual) self	Occupation (for Individual) architect
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
323.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2021

Transaction ID : SA11AI.27214

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Banks, Hannah, , ,

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

Mailing Address 107 Garland Road

City Newton	State MA	Zip Code 02459
----------------	-------------	-------------------

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

Name of Employer (for Individual) self	Occupation (for Individual) architect
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
373.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2021

Transaction ID : SA11AI.27215

Amount of Each Receipt this Period
50.00

Memo Item

B. Banks, Hannah, , ,

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

Mailing Address 107 Garland Road

City Newton	State MA	Zip Code 02459
----------------	-------------	-------------------

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

Name of Employer (for Individual) self	Occupation (for Individual) architect
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
398.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2021

Transaction ID : SA11AI.27216

Amount of Each Receipt this Period
25.00

Memo Item

C. Banks, Hannah, , ,

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

Mailing Address 107 Garland Road

City Newton	State MA	Zip Code 02459
----------------	-------------	-------------------

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

Name of Employer (for Individual) self	Occupation (for Individual) architect
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
423.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2021

Transaction ID : SA11AI.27217

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Banks, Hannah, , ,

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

Mailing Address 107 Garland Road

City Newton	State MA	Zip Code 02459
----------------	-------------	-------------------

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

Name of Employer (for Individual) self	Occupation (for Individual) architect
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
473.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2021

Transaction ID : SA11AI.27218

Amount of Each Receipt this Period
50.00

Memo Item

B. Banks, Hannah, , ,

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

Mailing Address 107 Garland Road

City Newton	State MA	Zip Code 02459
----------------	-------------	-------------------

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

Name of Employer (for Individual) self	Occupation (for Individual) architect
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
523.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2021

Transaction ID : SA11AI.27219

Amount of Each Receipt this Period
50.00

Memo Item

C. Banks, Hannah, , ,

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

Mailing Address 107 Garland Road

City Newton	State MA	Zip Code 02459
----------------	-------------	-------------------

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

Name of Employer (for Individual) self	Occupation (for Individual) architect
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
623.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		14		2021

Transaction ID : SA11AI.27220

Amount of Each Receipt this Period
100.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address 107 Garland Road

City Newton	State MA	Zip Code 02459
----------------	-------------	-------------------

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

Name of Employer (for Individual) self	Occupation (for Individual) architect
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
679.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	18	/	2021

Transaction ID : SA11AI.27221

Amount of Each Receipt this Period
56.00

Memo Item

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

Mailing Address 1701 S Flagler Dr Apt 1407

City West Palm Beach	State FL	Zip Code 33401
-------------------------	-------------	-------------------

FEC 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 ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2021

Transaction ID : SA11AI.27248

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 1701 S Flagler Dr Apt 1407

City West Palm Beach	State FL	Zip Code 33401
-------------------------	-------------	-------------------

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

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed
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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
10	/	07	/	2021

Transaction ID : SA11AI.27249

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	106.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 19 OF 191
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Beck, Stefanie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1701 S Flagler Dr Apt 1407
 City West Palm Beach State FL Zip Code 33401
 FEC 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 ▼ 270.00

Date of Receipt
 11 / 07 / 2021
Transaction ID : SA11AI.27250
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Beck, Stefanie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1701 S Flagler Dr Apt 1407
 City West Palm Beach State FL Zip Code 33401
 FEC 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 ▼ 295.00

Date of Receipt
 11 / 21 / 2021
Transaction ID : SA11AI.27251
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Beck, Stefanie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1701 S Flagler Dr Apt 1407
 City West Palm Beach State FL Zip Code 33401
 FEC 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 ▼ 320.00

Date of Receipt
 12 / 07 / 2021
Transaction ID : SA11AI.27252
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 191
	<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	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Bell, Stewart, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 240 Lincoln St
 City Astoria State OR Zip Code 97103
 FEC 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 / 14 / 2021
Transaction ID : SA11AI.27259
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Bell, Stewart, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 240 Lincoln St
 City Astoria State OR Zip Code 97103
 FEC 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 ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 14 / 2021
Transaction ID : SA11AI.27260
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Bell, Stewart, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 240 Lincoln St
 City Astoria State OR Zip Code 97103
 FEC 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 ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 24 / 2021
Transaction ID : SA11AI.27261
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 191
	<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	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address 240 Lincoln St

City Astoria	State OR	Zip Code 97103
-----------------	-------------	-------------------

FEC 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 ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		14		2021

Transaction ID : SA11AI.27262

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 240 Lincoln St

City Astoria	State OR	Zip Code 97103
-----------------	-------------	-------------------

FEC 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 ▼
380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2021

Transaction ID : SA11AI.27263

Amount of Each Receipt this Period
30.00

Memo Item

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

Mailing Address 240 Lincoln St

City Astoria	State OR	Zip Code 97103
-----------------	-------------	-------------------

FEC 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 ▼
405.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2021

Transaction ID : SA11AI.27264

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	80.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 191
	<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	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address 240 Lincoln St

City Astoria	State OR	Zip Code 97103
-----------------	-------------	-------------------

FEC 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 ▼
430.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	14	/	2021

Transaction ID : SA11AI.27265

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 240 Lincoln St

City Astoria	State OR	Zip Code 97103
-----------------	-------------	-------------------

FEC 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 ▼
455.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	14	/	2021

Transaction ID : SA11AI.27266

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 261 Vista del Parque

City Redondo Beach	State CA	Zip Code 90277
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FEC 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 ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2021

Transaction ID : SA11AI.27267

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1050.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Berkson, Theresa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1117 W Hemlock Ave
 City Visalia State CA Zip Code 93277
 FEC 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 **08 / 17 / 2021**
Transaction ID : SA11AI.27283
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Berliner, Diane, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3001 Club Drive
 City Los Angeles State CA Zip Code 90064
 FEC 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 ▼ 350.00

Date of Receipt **10 / 26 / 2021**
Transaction ID : SA11AI.27286
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Bernstein, Julie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 Oak Circle
 City Dover State MA Zip Code 02030
 FEC 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 ▼ 225.00

Date of Receipt **12 / 21 / 2021**
Transaction ID : SA11AI.27293
 Amount of Each Receipt this Period 50.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Bolton, Kate, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 123 Howard St
 City Petaluma State CA Zip Code 94952
 FEC 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 ▼ 220.00

Date of Receipt **09 / 01 / 2021**
Transaction ID : SA11AI.27338
 Amount of Each Receipt this Period 20.00
 Memo Item

B. Bolton, Kate, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 123 Howard St
 City Petaluma State CA Zip Code 94952
 FEC 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 ▼ 240.00

Date of Receipt **10 / 01 / 2021**
Transaction ID : SA11AI.27339
 Amount of Each Receipt this Period 20.00
 Memo Item

C. Bolton, Kate, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 123 Howard St
 City Petaluma State CA Zip Code 94952
 FEC 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 ▼ 260.00

Date of Receipt **11 / 01 / 2021**
Transaction ID : SA11AI.27340
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	60.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Bolton, Kate, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 123 Howard St
 City Petaluma State CA Zip Code 94952
 FEC 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 ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2021
Transaction ID : SA11AI.27341
 Amount of Each Receipt this Period
 20.00
 Memo Item

B. Brainard, Charles, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 W 12th St. Apt. 8-W
 City New York State NY Zip Code 10011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) not employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 247.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 19 / 2021
Transaction ID : SA11AI.27357
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. Brett, Maureen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16300 Van Aken Blvd
 City Cleveland State OH Zip Code 44120
 FEC 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 ▼ 201.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2021
Transaction ID : SA11AI.27369
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	145.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Broughton, Cathy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 160 15th Ave Ct
 City Hiawatha State IA Zip Code 52233
 FEC 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 ▼ 235.00

Date of Receipt **08 / 26 / 2021**
Transaction ID : SA11AI.27384
 Amount of Each Receipt this Period 60.00
 Memo Item

B. Broughton, Cathy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 160 15th Ave Ct
 City Hiawatha State IA Zip Code 52233
 FEC 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 ▼ 325.00

Date of Receipt **09 / 08 / 2021**
Transaction ID : SA11AI.27385
 Amount of Each Receipt this Period 90.00
 Memo Item

C. Broughton, Cathy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 160 15th Ave Ct
 City Hiawatha State IA Zip Code 52233
 FEC 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 ▼ 375.00

Date of Receipt **10 / 06 / 2021**
Transaction ID : SA11AI.27386
 Amount of Each Receipt this Period 50.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Broughton, Cathy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 160 15th Ave Ct
 City Hiawatha State IA Zip Code 52233
 FEC 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 ▼ 425.00

Date of Receipt **12 / 13 / 2021**
Transaction ID : SA11AI.27387
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Brown, Hamilton, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 399
 City Arroyo Seco State NM Zip Code 87514
 FEC 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 ▼ 225.00

Date of Receipt **11 / 25 / 2021**
Transaction ID : SA11AI.27395
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Brown, Hamilton, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 399
 City Arroyo Seco State NM Zip Code 87514
 FEC 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 **12 / 25 / 2021**
Transaction ID : SA11AI.27396
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 191
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Burns, Phoebe, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 193 Osborn St
 City Philadelphia State PA Zip Code 19128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) International SOS Occupation (for Individual) Data Analyst
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2021
Transaction ID : SA11AI.27422
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. Burns, Phoebe, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 193 Osborn St
 City Philadelphia State PA Zip Code 19128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) International SOS Occupation (for Individual) Data Analyst
 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
 10 / 30 / 2021
Transaction ID : SA11AI.27423
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. Burns, Phoebe, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 193 Osborn St
 City Philadelphia State PA Zip Code 19128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) International SOS Occupation (for Individual) Data Analyst
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2021
Transaction ID : SA11AI.27424
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Burns, Phoebe, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 193 Osborn St
 City Philadelphia State PA Zip Code 19128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) International SOS Occupation (for Individual) Data Analyst
 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
 12 / 30 / 2021
Transaction ID : SA11AI.27425
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Cancino, Diane, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2212 PO Box
 City Grass Valley State CA Zip Code 95945
 FEC 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 ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2021
Transaction ID : SA11AI.27453
 Amount of Each Receipt this Period 30.00
 Memo Item

C. Cancino, Diane, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2212 PO Box
 City Grass Valley State CA Zip Code 95945
 FEC 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 ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2021
Transaction ID : SA11AI.27454
 Amount of Each Receipt this Period 30.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 OF 191 (check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address 2212 PO Box

City Grass Valley	State CA	Zip Code 95945
----------------------	-------------	-------------------

FEC 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 ▼
270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	25	/	2021

Transaction ID : SA11AI.27455

Amount of Each Receipt this Period
30.00

Memo Item

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

Mailing Address 2212 PO Box

City Grass Valley	State CA	Zip Code 95945
----------------------	-------------	-------------------

FEC 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 ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	25	/	2021

Transaction ID : SA11AI.27456

Amount of Each Receipt this Period
30.00

Memo Item

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

Mailing Address PO Box 143

City Mount Hood Parkdale	State OR	Zip Code 97041
-----------------------------	-------------	-------------------

FEC 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 ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2021

Transaction ID : SA11AI.27493

Amount of Each Receipt this Period
40.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 31 OF 191
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Castanares, Jana, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 143
 City Mount Hood Parkdale State OR Zip Code 97041
 FEC 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 ▼ 245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2021
Transaction ID : SA11AI.27494
 Amount of Each Receipt this Period
 40.00
 Memo Item

B. Coddington, Jonathan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2634 N Upshur St.
 City Arlington State VA Zip Code 22207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Smithsonian Occupation (for Individual) Scientist
 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
 10 / 10 / 2021
Transaction ID : SA11AI.27534
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. COE, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 206 HEATHER LN
 City COLUMBIA State MO Zip Code 65203-1322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) none Occupation (for Individual) not employed
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 30 / 2021
Transaction ID : SA11AI.27535
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	315.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. COE, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 206 HEATHER LN
 City COLUMBIA State MO Zip Code 65203-1322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) none Occupation (for Individual) not employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 30 / 2021
Transaction ID : SA11AI.27536
 Amount of Each Receipt this Period 25.00
 Memo Item

B. COE, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 206 HEATHER LN
 City COLUMBIA State MO Zip Code 65203-1322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) none Occupation (for Individual) not employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 16 / 2021
Transaction ID : SA11AI.27537
 Amount of Each Receipt this Period 100.00
 Memo Item

C. COE, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 206 HEATHER LN
 City COLUMBIA State MO Zip Code 65203-1322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) none Occupation (for Individual) not employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 09 / 30 / 2021
Transaction ID : SA11AI.27538
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address **206 HEATHER LN**

City COLUMBIA	State MO	Zip Code 65203-1322
-------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) none	Occupation (for Individual) not employed
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt
10 / 23 / 2021

Transaction ID : SA11AI.27539

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address **206 HEATHER LN**

City COLUMBIA	State MO	Zip Code 65203-1322
-------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) none	Occupation (for Individual) not employed
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
10 / 30 / 2021

Transaction ID : SA11AI.27540

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address **206 HEATHER LN**

City COLUMBIA	State MO	Zip Code 65203-1322
-------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) none	Occupation (for Individual) not employed
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
575.00

Date of Receipt
11 / 30 / 2021

Transaction ID : SA11AI.27541

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 191
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. COE, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 206 HEATHER LN
 City COLUMBIA State MO Zip Code 65203-1322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) none Occupation (for Individual) not employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 12 / 30 / 2021
Transaction ID : SA11AI.27542
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Cohen, Naomi, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address POB 39
 City Gap Mills State WV Zip Code 24941
 FEC 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 ▼ 1575.00

Date of Receipt 10 / 19 / 2021
Transaction ID : SA11AI.27543
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Cohen, Naomi, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address POB 39
 City Gap Mills State WV Zip Code 24941
 FEC 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 ▼ 1825.00

Date of Receipt 10 / 22 / 2021
Transaction ID : SA11AI.27544
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	325.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address POB 39

City Gap Mills	State WV	Zip Code 24941
-------------------	-------------	-------------------

FEC 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 ▼
1885.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2021

Transaction ID : SA11AI.27545

Amount of Each Receipt this Period
60.00

Memo Item

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

Mailing Address POB 39

City Gap Mills	State WV	Zip Code 24941
-------------------	-------------	-------------------

FEC 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 ▼
4385.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2021

Transaction ID : SA11AI.29596

Amount of Each Receipt this Period
2500.00

Memo Item

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

Mailing Address 4349 Mount Jeffers Avenue

City San Diego	State CA	Zip Code 92117
-------------------	-------------	-------------------

FEC 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 ▼
693.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	23	/	2021

Transaction ID : SA11AI.27580

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	2585.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 36 OF 191
<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

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Crary, Jill, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4349 Mount Jeffers Avenue
 City San Diego State CA Zip Code 92117
 FEC 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 ▼ 718.00

Date of Receipt 07 / 24 / 2021
Transaction ID : SA11AI.27581
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Crary, Jill, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4349 Mount Jeffers Avenue
 City San Diego State CA Zip Code 92117
 FEC 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 ▼ 736.00

Date of Receipt 07 / 31 / 2021
Transaction ID : SA11AI.27582
 Amount of Each Receipt this Period 18.00
 Memo Item

C. Culnan, Carol, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 177 Cedar Hill Road
 City Strasburg State VA Zip Code 22657
 FEC 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 08 / 17 / 2021
Transaction ID : SA11AI.27591
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	93.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Culnan, Carol, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 177 Cedar Hill Road
 City Strasburg State VA Zip Code 22657
 FEC 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 ▼ 300.00

Date of Receipt 08 / 31 / 2021
Transaction ID : SA11AI.27592
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Curry, Ramona, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5510 N Sheridan Road Apt. 9B
 City CHICAGO State IL Zip Code 60640
 FEC 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 ▼ 325.00

Date of Receipt 10 / 24 / 2021
Transaction ID : SA11AI.27603
 Amount of Each Receipt this Period 130.00
 Memo Item

C. Derrickson, Scott, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 466 Wilsn Ln
 City Front Royal State VA Zip Code 22630
 FEC 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 ▼ 260.00

Date of Receipt 08 / 09 / 2021
Transaction ID : SA11AI.27639
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	215.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 38 OF 191
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address 466 Wilsn Ln

City Front Royal	State VA	Zip Code 22630
---------------------	-------------	-------------------

FEC 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 ▼
285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2021

Transaction ID : SA11AI.27640

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 10 Auld Brig View Auldgirth

City Dumfries	State ZZ	Zip Code
------------------	-------------	----------

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

Name of Employer (for Individual) NHS Dumfries and Galloway	Occupation (for Individual) Family medicine
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2021

Transaction ID : SA11AI.29545

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 10 Auld Brig View Auldgirth

City Dumfries	State ZZ	Zip Code
------------------	-------------	----------

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

Name of Employer (for Individual) NHS Dumfries and Galloway	Occupation (for Individual) Family medicine
--	--

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
10		23		2021

Transaction ID : SA11AI.29546

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 191
	<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	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Desai, Nitin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 Auld Brig View Auldgirth
 City Dumfries State ZZ Zip Code
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) NHS Dumfries and Galloway Occupation (for Individual) Family medicine
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 275.00

Date of Receipt 11 / 23 / 2021
Transaction ID : SA11AI.29547
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Desai, Nitin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 Auld Brig View Auldgirth
 City Dumfries State ZZ Zip Code
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) NHS Dumfries and Galloway Occupation (for Individual) Family medicine
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 300.00

Date of Receipt 12 / 23 / 2021
Transaction ID : SA11AI.29548
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Dooley, Winifred, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4420 n. clybourn
 City burbank State CA Zip Code 91505
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) self Occupation (for Individual) writer
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 932.00

Date of Receipt 07 / 07 / 2021
Transaction ID : SA11AI.27663
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... 150.00
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 40 OF 191
<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

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Dooley, Winifred, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4420 n. clybourn
 City burbank State CA Zip Code 91505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) writer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 982.00

Date of Receipt **07 / 11 / 2021**
Transaction ID : SA11AI.27664
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Dooley, Winifred, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4420 n. clybourn
 City burbank State CA Zip Code 91505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) writer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1232.00

Date of Receipt **08 / 05 / 2021**
Transaction ID : SA11AI.27665
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Dooley, Winifred, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4420 n. clybourn
 City burbank State CA Zip Code 91505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) writer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1732.00

Date of Receipt **08 / 29 / 2021**
Transaction ID : SA11AI.27666
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address 4420 n. clybourn

City burbank	State CA	Zip Code 91505
-----------------	-------------	-------------------

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

Name of Employer (for Individual) self	Occupation (for Individual) writer
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1982.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2021

Transaction ID : SA11AI.27667

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 4420 n. clybourn

City burbank	State CA	Zip Code 91505
-----------------	-------------	-------------------

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

Name of Employer (for Individual) self	Occupation (for Individual) writer
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2482.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2021

Transaction ID : SA11AI.27668

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 4420 n. clybourn

City burbank	State CA	Zip Code 91505
-----------------	-------------	-------------------

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

Name of Employer (for Individual) self	Occupation (for Individual) writer
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2857.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2021

Transaction ID : SA11AI.27669

Amount of Each Receipt this Period
375.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1125.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Dooley, Winifred, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4420 n. clybourn
 City burbank State CA Zip Code 91505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) writer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2957.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2021
Transaction ID : SA11AI.27670
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. Dooley, Winifred, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4420 n. clybourn
 City burbank State CA Zip Code 91505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) writer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3057.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2021
Transaction ID : SA11AI.27671
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. Dooley, Winifred, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4420 n. clybourn
 City burbank State CA Zip Code 91505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) writer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3107.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2021
Transaction ID : SA11AI.27672
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Dooley, Winifred, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4420 n. clybourn
 City burbank State CA Zip Code 91505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) writer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3607.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 16 / 2021
Transaction ID : SA11AI.27673
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. Dooley, Winifred, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4420 n. clybourn
 City burbank State CA Zip Code 91505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) writer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3707.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 07 / 2021
Transaction ID : SA11AI.27674
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. Dragon, Carol, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 800 Deerfield Road #305
 City Highland Park State IL Zip Code 60035
 FEC 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 ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 04 / 2021
Transaction ID : SA11AI.27689
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	850.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 44 OF 191
<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

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Dragon, Carol, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 800 Deerfield Road #305
 City Highland Park State IL Zip Code 60035
 FEC 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 ▼ 750.00

Date of Receipt **10 / 24 / 2021**
Transaction ID : SA11AI.27690
 Amount of Each Receipt this Period 250.00
 Memo Item

B. drummond, alec, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3811 SE 40th ave
 City Portland State OR Zip Code 97202
 FEC 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 ▼ 400.00

Date of Receipt **12 / 13 / 2021**
Transaction ID : SA11AI.27692
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Edwards, Jon, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 715
 City South Freeport State ME Zip Code 04078
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt **07 / 11 / 2021**
Transaction ID : SA11AI.27708
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Edwards, Jon, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 715
 City South Freeport State ME Zip Code 04078
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 24 / 2021
Transaction ID : SA11AI.27709
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. Edwards, Jon, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 715
 City South Freeport State ME Zip Code 04078
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2021
Transaction ID : SA11AI.27710
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. Edwards, Jon, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 715
 City South Freeport State ME Zip Code 04078
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 975.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2021
Transaction ID : SA11AI.27711
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Edwards, Jon, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 715
 City South Freeport State ME Zip Code 04078
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 09 / 22 / 2021
Transaction ID : SA11AI.27712
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. Edwards, Jon, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 715
 City South Freeport State ME Zip Code 04078
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 12 / 14 / 2021
Transaction ID : SA11AI.27713
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. Ericson, Bryan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 803 Turkey Farm Rd
 City Mahomet State IL Zip Code 61853
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Forcepoint LLC Occupation (for Individual) Programmer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 221.00

Date of Receipt
 07 / 18 / 2021
Transaction ID : SA11AI.27744
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address 803 Turkey Farm Rd

City Mahomet	State IL	Zip Code 61853
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Forcepoint LLC	Occupation (for Individual) Programmer
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
241.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		10		2021

Transaction ID : SA11AI.27745

Amount of Each Receipt this Period
20.00

Memo Item

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

Mailing Address 803 Turkey Farm Rd

City Mahomet	State IL	Zip Code 61853
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Forcepoint LLC	Occupation (for Individual) Programmer
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
266.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2021

Transaction ID : SA11AI.27746

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 803 Turkey Farm Rd

City Mahomet	State IL	Zip Code 61853
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Forcepoint LLC	Occupation (for Individual) Programmer
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
286.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2021

Transaction ID : SA11AI.27747

Amount of Each Receipt this Period
20.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	65.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address 803 Turkey Farm Rd

City Mahomet	State IL	Zip Code 61853
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Forcepoint LLC	Occupation (for Individual) Programmer
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
306.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2021

Transaction ID : SA11AI.27748

Amount of Each Receipt this Period
20.00

Memo Item

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

Mailing Address 803 Turkey Farm Rd

City Mahomet	State IL	Zip Code 61853
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Forcepoint LLC	Occupation (for Individual) Programmer
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
326.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2021

Transaction ID : SA11AI.27749

Amount of Each Receipt this Period
20.00

Memo Item

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

Mailing Address 803 Turkey Farm Rd

City Mahomet	State IL	Zip Code 61853
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Forcepoint LLC	Occupation (for Individual) Programmer
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
351.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		12		2021

Transaction ID : SA11AI.27750

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	65.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address 803 Turkey Farm Rd

City Mahomet	State IL	Zip Code 61853
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Forcepoint LLC	Occupation (for Individual) Programmer
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
371.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	21	/	2021

Transaction ID : SA11AI.27751

Amount of Each Receipt this Period
20.00

Memo Item

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

Mailing Address 803 Turkey Farm Rd

City Mahomet	State IL	Zip Code 61853
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Forcepoint LLC	Occupation (for Individual) Programmer
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
391.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	27	/	2021

Transaction ID : SA11AI.27752

Amount of Each Receipt this Period
20.00

Memo Item

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

Mailing Address 52 Sandy Creek Way

City Novato	State CA	Zip Code 94947
----------------	-------------	-------------------

FEC 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	/	12	/	2021

Transaction ID : SA11AI.27756

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	290.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Faissler, Diane G., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 Darby Lane
 City Rockport State MA Zip Code 01966
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) none
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 436.00

Date of Receipt 07 / 11 / 2021
Transaction ID : SA11AI.27772
 Amount of Each Receipt this Period 186.00
 Memo Item

B. Faissler, Diane G., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 Darby Lane
 City Rockport State MA Zip Code 01966
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) none
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 686.00

Date of Receipt 10 / 14 / 2021
Transaction ID : SA11AI.27773
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Fiuzat, Mitra, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1855 W Katella Ave. Ste 340
 City Orange State CA Zip Code 92867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eco & Associates Inc. Occupation (for Individual) President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 18 / 2021
Transaction ID : SA11AI.27798
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	936.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address 1068 N Eagle Hollow Rd

City Green Valley	State AZ	Zip Code 85614
----------------------	-------------	-------------------

FEC 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 ▼
1375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		29		2021

Transaction ID : SA11AI.27805

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 1068 N Eagle Hollow Rd

City Green Valley	State AZ	Zip Code 85614
----------------------	-------------	-------------------

FEC 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 ▼
1475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2021

Transaction ID : SA11AI.27806

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 1068 N Eagle Hollow Rd

City Green Valley	State AZ	Zip Code 85614
----------------------	-------------	-------------------

FEC 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 ▼
1775.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2021

Transaction ID : SA11AI.27807

Amount of Each Receipt this Period
300.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Fluhrer, Patricia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1068 N Eagle Hollow Rd
 City Green Valley State AZ Zip Code 85614
 FEC 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 1875.00

Date of Receipt **11 / 30 / 2021**
Transaction ID : SA11AI.27808
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Fluhrer, Patricia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1068 N Eagle Hollow Rd
 City Green Valley State AZ Zip Code 85614
 FEC 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 1975.00

Date of Receipt **12 / 30 / 2021**
Transaction ID : SA11AI.27809
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Fox, Cameron, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3517 Edgehill Street
 City Grapevine State TX Zip Code 76051
 FEC 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 225.00

Date of Receipt **11 / 23 / 2021**
Transaction ID : SA11AI.27823
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... **225.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 191
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Fox, Cameron, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3517 Edgehill Street
 City Grapevine State TX Zip Code 76051
 FEC 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
 12 / 23 / 2021
Transaction ID : SA11AI.27824
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Gallie Jewett, Brenda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 Rose Av
 City Toronto State ZZ Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SickKids Hospital Occupation (for Individual) MD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 09 / 2021
Transaction ID : SA11AI.27839
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Gallie Jewett, Brenda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 Rose Av
 City Toronto State ZZ Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SickKids Hospital Occupation (for Individual) MD
 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
 08 / 09 / 2021
Transaction ID : SA11AI.27840
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Gallt, Nancy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 273 Charlton Avenue
 City South Orange State NJ Zip Code 07079
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) literary agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 19 / 2021
Transaction ID : SA11AI.27844
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Gallt, Nancy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 273 Charlton Avenue
 City South Orange State NJ Zip Code 07079
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) literary agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 19 / 2021
Transaction ID : SA11AI.27845
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Gallt, Nancy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 273 Charlton Avenue
 City South Orange State NJ Zip Code 07079
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) literary agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 12 / 19 / 2021
Transaction ID : SA11AI.27846
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 191
	<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)
YOUTH PROGRESSIVE ACTION CATALYST

A. Goldsmith, Sandy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 768 27th Street
 City Manhattan Beach State CA Zip Code 90266
 FEC 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 ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2021
Transaction ID : SA11AI.27904
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. Goodrich, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3170 Larkwood Ct
 City Fallbrook State CA Zip Code 92028
 FEC 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 ▼ 445.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 09 / 2021
Transaction ID : SA11AI.27917
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. Goodrich, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3170 Larkwood Ct
 City Fallbrook State CA Zip Code 92028
 FEC 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 ▼ 495.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 14 / 2021
Transaction ID : SA11AI.27918
 Amount of Each Receipt this Period
 50.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Gray, Randolph, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3535 Linda Vista Dr #337

City San Marcos	State CA	Zip Code 92078
--------------------	-------------	-------------------

FEC 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 ▼
230.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 29 / 2021
Transaction ID : SA11AI.27942

Amount of Each Receipt this Period
50.00

Memo Item

B. Gray, Randolph, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3535 Linda Vista Dr #337

City San Marcos	State CA	Zip Code 92078
--------------------	-------------	-------------------

FEC 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 ▼
280.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 04 / 2021
Transaction ID : SA11AI.27943

Amount of Each Receipt this Period
50.00

Memo Item

C. Green, Gail and Bill, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1604 Atherton Way

City Salinas	State CA	Zip Code 93906
-----------------	-------------	-------------------

FEC 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 ▼
220.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 12 / 2021
Transaction ID : SA11AI.27947

Amount of Each Receipt this Period
20.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	120.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Green, Gail and Bill, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 18 / 2021 Transaction ID : SA11AI.27948
Mailing Address 1604 Atherton Way		Amount of Each Receipt this Period 25.00
City Salinas	State CA	Zip Code 93906
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Green, Gail and Bill, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 12 / 2021 Transaction ID : SA11AI.27949
Mailing Address 1604 Atherton Way		Amount of Each Receipt this Period 20.00
City Salinas	State CA	Zip Code 93906
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Green, Gail and Bill, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 18 / 2021 Transaction ID : SA11AI.27950
Mailing Address 1604 Atherton Way		Amount of Each Receipt this Period 25.00
City Salinas	State CA	Zip Code 93906
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 290.00	

SUBTOTAL of Receipts This Page (optional).....▶	70.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 191
	<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	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Green, Gail and Bill, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1604 Atherton Way
 City Salinas State CA Zip Code 93906
 FEC 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 ▼ 310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2021
Transaction ID : SA11AI.27951
 Amount of Each Receipt this Period
 20.00
 Memo Item

B. Green, Gail and Bill, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1604 Atherton Way
 City Salinas State CA Zip Code 93906
 FEC 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 ▼ 335.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 18 / 2021
Transaction ID : SA11AI.27952
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. Guthman, Nick, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10913 Lindblade St.
 City Culver City State CA Zip Code 90230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) YPAC Occupation (for Individual) Organizer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 455.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2021
Transaction ID : SA11AI.29774
 Amount of Each Receipt this Period
 108.92
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	153.92
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address 650 Huntington Avenue #8F

City Boston	State MA	Zip Code 02115-5914
----------------	-------------	------------------------

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

Name of Employer (for Individual) Massachusetts Inst. of Technology	Occupation (for Individual) Administrative Assistant
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		11		2021

Transaction ID : SA11AI.28004

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 650 Huntington Avenue #8F

City Boston	State MA	Zip Code 02115-5914
----------------	-------------	------------------------

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

Name of Employer (for Individual) Massachusetts Inst. of Technology	Occupation (for Individual) Administrative Assistant
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		05		2021

Transaction ID : SA11AI.28005

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 650 Huntington Avenue #8F

City Boston	State MA	Zip Code 02115-5914
----------------	-------------	------------------------

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

Name of Employer (for Individual) Massachusetts Inst. of Technology	Occupation (for Individual) Administrative Assistant
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2021

Transaction ID : SA11AI.28006

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 60 OF 191
<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

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address 650 Huntington Avenue #8F

City Boston	State MA	Zip Code 02115-5914
----------------	-------------	------------------------

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

Name of Employer (for Individual) Massachusetts Inst. of Technology	Occupation (for Individual) Administrative Assistant
--	---

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
12	/	04	/	2021

Transaction ID : SA11AI.28007

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address PO Box 88

City Rutherford	State CA	Zip Code 94573
--------------------	-------------	-------------------

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

Name of Employer (for Individual) self-employed	Occupation (for Individual) veterinarian
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	05	/	2021

Transaction ID : SA11AI.28016

Amount of Each Receipt this Period
30.00

Memo Item

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

Mailing Address PO Box 88

City Rutherford	State CA	Zip Code 94573
--------------------	-------------	-------------------

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

Name of Employer (for Individual) self-employed	Occupation (for Individual) veterinarian
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	10	/	2021

Transaction ID : SA11AI.28017

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	155.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 191
	<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	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
hege man, elizabeth, , ,

Mailing Address 100 riverside

City ny	State NY	Zip Code 10024
------------	-------------	-------------------

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

Name of Employer (for Individual) city university of new york	Occupation (for Individual) professor
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		14		2021

Transaction ID : SA11AI.28028

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 100 riverside

City ny	State NY	Zip Code 10024
------------	-------------	-------------------

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

Name of Employer (for Individual) city university of new york	Occupation (for Individual) professor
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		14		2021

Transaction ID : SA11AI.28029

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 100 riverside

City ny	State NY	Zip Code 10024
------------	-------------	-------------------

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

Name of Employer (for Individual) city university of new york	Occupation (for Individual) professor
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		14		2021

Transaction ID : SA11AI.28030

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
hege man, elizabeth, , ,

Mailing Address 100 riverside

City ny	State NY	Zip Code 10024
------------	-------------	-------------------

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

Name of Employer (for Individual) city university of new york	Occupation (for Individual) professor
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	10	/	2021

Transaction ID : SA11AI.28031

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 100 riverside

City ny	State NY	Zip Code 10024
------------	-------------	-------------------

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

Name of Employer (for Individual) city university of new york	Occupation (for Individual) professor
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
625.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	17	/	2021

Transaction ID : SA11AI.28032

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 1109 Yewell

City iowa City	State IA	Zip Code 52240
-------------------	-------------	-------------------

FEC 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 ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2021

Transaction ID : SA11AI.28084

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 191
	<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	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address 2001 Manorview Cir NW

City Salem	State OR	Zip Code 97304
---------------	-------------	-------------------

FEC 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 ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2021

Transaction ID : SA11AI.28104

Amount of Each Receipt this Period
60.00

Memo Item

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

Mailing Address 2001 Manorview Cir NW

City Salem	State OR	Zip Code 97304
---------------	-------------	-------------------

FEC 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 ▼
340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2021

Transaction ID : SA11AI.28105

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 2001 Manorview Cir NW

City Salem	State OR	Zip Code 97304
---------------	-------------	-------------------

FEC 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 ▼
440.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2021

Transaction ID : SA11AI.28106

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	260.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Hoyt, Ivan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2001 Manorview Cir NW
 City Salem State OR Zip Code 97304
 FEC 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 ▼ 540.00

Date of Receipt **12 / 16 / 2021**
Transaction ID : SA11AI.28107
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Huggins, Lucinda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 803 Warner Rd
 City Schenectady State NY Zip Code 12309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) not employed Occupation (for Individual) retired IT professional
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt **08 / 10 / 2021**
Transaction ID : SA11AI.28115
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Jones, Scott, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 2026
 City Angel Fire State NM Zip Code 87710
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) Writer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **07 / 24 / 2021**
Transaction ID : SA11AI.28171
 Amount of Each Receipt this Period 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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)
YOUTH PROGRESSIVE ACTION CATALYST

A. Jones, Scott, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 2026

City Angel Fire	State NM	Zip Code 87710
--------------------	-------------	-------------------

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

Name of Employer (for Individual) self	Occupation (for Individual) 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
 09 / 25 / 2021
Transaction ID : SA11AI.28172

Amount of Each Receipt this Period
 200.00

Memo Item

B. Jones, Scott, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 2026

City Angel Fire	State NM	Zip Code 87710
--------------------	-------------	-------------------

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

Name of Employer (for Individual) self	Occupation (for Individual) Writer
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 14 / 2021
Transaction ID : SA11AI.28173

Amount of Each Receipt this Period
 100.00

Memo Item

C. Jones, Scott, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 2026

City Angel Fire	State NM	Zip Code 87710
--------------------	-------------	-------------------

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

Name of Employer (for Individual) self	Occupation (for Individual) Writer
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 17 / 2021
Transaction ID : SA11AI.28174

Amount of Each Receipt this Period
 200.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Jones, Scott, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 2026
 City Angel Fire State NM Zip Code 87710
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) Writer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt
 12 / 07 / 2021
Transaction ID : SA11AI.28175
 Amount of Each Receipt this Period
 150.00
 Memo Item

B. Jones, Scott, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 2026
 City Angel Fire State NM Zip Code 87710
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) Writer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 12 / 19 / 2021
Transaction ID : SA11AI.28176
 Amount of Each Receipt this Period
 150.00
 Memo Item

C. Jordan, Pamela, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3606 NE 189th Place
 City Lake Forest Park State WA Zip Code 98155
 FEC 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
 08 / 29 / 2021
Transaction ID : SA11AI.28180
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address 104 Sunnyland Dr.

City San Antonio	State TX	Zip Code 78228
---------------------	-------------	-------------------

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

Name of Employer (for Individual) none	Occupation (for Individual) not employed
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
329.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		11		2021

Transaction ID : SA11AI.28183

Amount of Each Receipt this Period
47.00

Memo Item

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

Mailing Address 104 Sunnyland Dr.

City San Antonio	State TX	Zip Code 78228
---------------------	-------------	-------------------

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

Name of Employer (for Individual) none	Occupation (for Individual) not employed
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
376.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2021

Transaction ID : SA11AI.28184

Amount of Each Receipt this Period
47.00

Memo Item

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

Mailing Address 104 Sunnyland Dr.

City San Antonio	State TX	Zip Code 78228
---------------------	-------------	-------------------

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

Name of Employer (for Individual) none	Occupation (for Individual) not employed
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
423.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2021

Transaction ID : SA11AI.28185

Amount of Each Receipt this Period
47.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	141.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Joseph, Margaret, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 Sunnyland Dr.
 City San Antonio State TX Zip Code 78228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) none Occupation (for Individual) not employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 470.00

Date of Receipt 10 / 11 / 2021
Transaction ID : SA11AI.28186
 Amount of Each Receipt this Period 47.00
 Memo Item

B. Joseph, Margaret, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 Sunnyland Dr.
 City San Antonio State TX Zip Code 78228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) none Occupation (for Individual) not employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 517.00

Date of Receipt 11 / 11 / 2021
Transaction ID : SA11AI.28187
 Amount of Each Receipt this Period 47.00
 Memo Item

C. Joseph, Margaret, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 Sunnyland Dr.
 City San Antonio State TX Zip Code 78228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) none Occupation (for Individual) not employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 564.00

Date of Receipt 12 / 11 / 2021
Transaction ID : SA11AI.28188
 Amount of Each Receipt this Period 47.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	141.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 69 OF 191
<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

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Karson, Evelyn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5824 Conway Road
 City Bethesda State MD Zip Code 20817
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) self Occupation (for Individual) physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 216.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2021
Transaction ID : SA11AI.28207
 Amount of Each Receipt this Period
 90.00
 Memo Item

B. Kilman, Angela, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4320 Alder Drive
 City San Diego State CA Zip Code 92116
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) self Occupation (for Individual) psychologist
 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
 08 / 18 / 2021
Transaction ID : SA11AI.28236
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. Kilman, Angela, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4320 Alder Drive
 City San Diego State CA Zip Code 92116
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) self Occupation (for Individual) psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 29 / 2021
Transaction ID : SA11AI.28237
 Amount of Each Receipt this Period
 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	840.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 70 OF 191
<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

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Kilman, Angela, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4320 Alder Drive
 City San Diego State CA Zip Code 92116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **10 / 16 / 2021**
Transaction ID : SA11AI.28238
 Amount of Each Receipt this Period 250.00
 Memo Item

B. King, Sue, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 Sausalito Blvd
 City Sausalito State CA Zip Code 94965
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Shop owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **09 / 08 / 2021**
Transaction ID : SA11AI.28242
 Amount of Each Receipt this Period 100.00
 Memo Item

C. King, Sue, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 Sausalito Blvd
 City Sausalito State CA Zip Code 94965
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Shop owner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **10 / 11 / 2021**
Transaction ID : SA11AI.28243
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	375.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Kleinberg-Levin, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 171 West 79 St
 City New York State NY Zip Code 10024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1610.00

Date of Receipt **07 / 08 / 2021**
Transaction ID : SA11AI.28257
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Kleinrath DDS, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1343 Greenbrier Rd
 City San Carlos State CA Zip Code 94070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) dance teacher
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 09 / 2021**
Transaction ID : SA11AI.28259
 Amount of Each Receipt this Period 250.00
 Memo Item

C. LAINER, ELEANOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17527 Magnolia Bl
 City Encino State CA Zip Code 91316
 FEC 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 ▼ 500.00

Date of Receipt **08 / 08 / 2021**
Transaction ID : SA11AI.28309
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. LAINER, ELEANOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17527 Magnolia Bl
 City Encino State CA Zip Code 91316
 FEC 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 ▼ 1500.00

Date of Receipt **11 / 13 / 2021**
Transaction ID : SA11AI.28310
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Lebowitz, Jacob, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5911 Lone Oak Dr.
 City Bethesda State MD Zip Code 20814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) none Occupation (for Individual) retired scientist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **09 / 12 / 2021**
Transaction ID : SA11AI.28354
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Lebowitz, Jacob, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5911 Lone Oak Dr.
 City Bethesda State MD Zip Code 20814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) none Occupation (for Individual) retired scientist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **10 / 12 / 2021**
Transaction ID : SA11AI.28355
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1050.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Lebowitz, Jacob, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5911 Lone Oak Dr.
 City Bethesda State MD Zip Code 20814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) none Occupation (for Individual) retired scientist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **11 / 12 / 2021**
Transaction ID : SA11AI.28356
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Lebowitz, Jacob, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5911 Lone Oak Dr.
 City Bethesda State MD Zip Code 20814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) none Occupation (for Individual) retired scientist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **12 / 12 / 2021**
Transaction ID : SA11AI.28357
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Levin, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 W. Erie St. Apt. 2
 City Chicago State IL Zip Code 60654
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Levin Schreder & Carey Ltd Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt **07 / 30 / 2021**
Transaction ID : SA11AI.28384
 Amount of Each Receipt this Period 150.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 74 OF 191 (check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address 24 W. Erie St. Apt. 2

City Chicago	State IL	Zip Code 60654
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Levin Schreder & Carey Ltd	Occupation (for Individual) Attorney
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2021

Transaction ID : SA11AI.28385

Amount of Each Receipt this Period
150.00

Memo Item

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

Mailing Address 24 W. Erie St. Apt. 2

City Chicago	State IL	Zip Code 60654
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Levin Schreder & Carey Ltd	Occupation (for Individual) Attorney
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2021

Transaction ID : SA11AI.28386

Amount of Each Receipt this Period
150.00

Memo Item

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

Mailing Address 24 W. Erie St. Apt. 2

City Chicago	State IL	Zip Code 60654
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Levin Schreder & Carey Ltd	Occupation (for Individual) Attorney
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2021

Transaction ID : SA11AI.28389

Amount of Each Receipt this Period
150.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Levin, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 W. Erie St. Apt. 2
 City Chicago State IL Zip Code 60654
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Levin Schreder & Carey Ltd Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1650.00

Date of Receipt 11 / 30 / 2021
Transaction ID : SA11AI.28390
 Amount of Each Receipt this Period 150.00
 Memo Item

B. Levin, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 W. Erie St. Apt. 2
 City Chicago State IL Zip Code 60654
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Levin Schreder & Carey Ltd Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt 12 / 30 / 2021
Transaction ID : SA11AI.28391
 Amount of Each Receipt this Period 150.00
 Memo Item

C. Linderman, Christine E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 277 Riverside Dr
 City Florence State MA Zip Code 01062
 FEC 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 ▼ 275.00

Date of Receipt 07 / 13 / 2021
Transaction ID : SA11AI.28404
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Linderman, Christine E, , ,

Mailing Address 277 Riverside Dr

City Florence	State MA	Zip Code 01062
------------------	-------------	-------------------

FEC 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 ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		13		2021

Transaction ID : SA11AI.28405

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 277 Riverside Dr

City Florence	State MA	Zip Code 01062
------------------	-------------	-------------------

FEC 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 ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2021

Transaction ID : SA11AI.28406

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 277 Riverside Dr

City Florence	State MA	Zip Code 01062
------------------	-------------	-------------------

FEC 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 ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2021

Transaction ID : SA11AI.28407

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Linderman, Christine E, , ,

Mailing Address 277 Riverside Dr

City Florence	State MA	Zip Code 01062
------------------	-------------	-------------------

FEC 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 ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	13	/	2021

Transaction ID : SA11AI.28408

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 277 Riverside Dr

City Florence	State MA	Zip Code 01062
------------------	-------------	-------------------

FEC 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 ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	13	/	2021

Transaction ID : SA11AI.28409

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 314 Polk Street

City Raleigh	State NC	Zip Code 27604
-----------------	-------------	-------------------

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 ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	07	/	2021

Transaction ID : SA11AI.29582

Amount of Each Receipt this Period
400.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Lustgarden, Steve, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28 Hanover Court
 City Santa Cruz State CA Zip Code 95062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) nonprofit Occupation (for Individual) manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 05 / 2021
Transaction ID : SA11AI.28435
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Lustgarden, Steve, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28 Hanover Court
 City Santa Cruz State CA Zip Code 95062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) nonprofit Occupation (for Individual) manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 23 / 2021
Transaction ID : SA11AI.28436
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Lustgarden, Steve, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28 Hanover Court
 City Santa Cruz State CA Zip Code 95062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) nonprofit Occupation (for Individual) manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 12 / 02 / 2021
Transaction ID : SA11AI.28437
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Machen, Mary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 Rocky Valley Cv
 City Little Rock State AR Zip Code 72212
 FEC 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 ▼ 225.00

Date of Receipt **09 / 19 / 2021**
Transaction ID : SA11AI.28451
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Machen, Mary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 Rocky Valley Cv
 City Little Rock State AR Zip Code 72212
 FEC 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 **10 / 19 / 2021**
Transaction ID : SA11AI.28452
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Machen, Mary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 Rocky Valley Cv
 City Little Rock State AR Zip Code 72212
 FEC 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 ▼ 275.00

Date of Receipt **11 / 19 / 2021**
Transaction ID : SA11AI.28453
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Machen, Mary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 Rocky Valley Cv
 City Little Rock State AR Zip Code 72212
 FEC 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 ▼ 300.00

Date of Receipt **12 / 19 / 2021**
Transaction ID : SA11AI.28454
 Amount of Each Receipt this Period 25.00
 Memo Item

B. MacWhinney, Brian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5435 Aylesboro Avenue
 City Pittsburgh State PA Zip Code 15217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CMU Occupation (for Individual) Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **10 / 30 / 2021**
Transaction ID : SA11AI.28463
 Amount of Each Receipt this Period 90.00
 Memo Item

C. Manning, Marcy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 E. Poplar Rd.
 City Sterling State VA Zip Code 20164
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The World's Best Prep Course Inc. Occupation (for Individual) corporation president
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt **09 / 30 / 2021**
Transaction ID : SA11AI.28476
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	365.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 191
	<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	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. McArthur, William, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 210 Valley Oak Drive
 City Greenville State SC Zip Code 29617
 FEC 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
 12 / 08 / 2021
Transaction ID : SA11AI.28516
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. McArthur, William, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 210 Valley Oak Drive
 City Greenville State SC Zip Code 29617
 FEC 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 ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2021
Transaction ID : SA11AI.28517
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. McLean, Erica, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 West 81st Street
 City New York State NY Zip Code 10024
 FEC 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 ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2021
Transaction ID : SA11AI.28540
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 82 OF 191
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. McLean, Erica, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 West 81st Street
 City New York State NY Zip Code 10024
 FEC 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 ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 09 / 2021
Transaction ID : SA11AI.28541
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. McLean, Erica, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 West 81st Street
 City New York State NY Zip Code 10024
 FEC 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 ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 09 / 2021
Transaction ID : SA11AI.28542
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. Mehl, Carter, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1054 Peralta Avenue
 City Albany State CA Zip Code 94706
 FEC 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 ▼ 365.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2021
Transaction ID : SA11AI.28552
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address 1054 Peralta Avenue

City Albany	State CA	Zip Code 94706
----------------	-------------	-------------------

FEC 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 ▼
395.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	17	/	2021

Transaction ID : SA11AI.28553

Amount of Each Receipt this Period

30.00

 Memo Item

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

Mailing Address 1054 Peralta Avenue

City Albany	State CA	Zip Code 94706
----------------	-------------	-------------------

FEC 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 ▼
495.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	09	/	2021

Transaction ID : SA11AI.28554

Amount of Each Receipt this Period

100.00

 Memo Item

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

Mailing Address 1054 Peralta Avenue

City Albany	State CA	Zip Code 94706
----------------	-------------	-------------------

FEC 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 ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	17	/	2021

Transaction ID : SA11AI.28555

Amount of Each Receipt this Period

30.00

 Memo Item

SUBTOTAL of Receipts This Page (optional).....	▶	160.00
TOTAL This Period (last page this line number only).....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 191
	<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	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address 1054 Peralta Avenue

City Albany	State CA	Zip Code 94706
----------------	-------------	-------------------

FEC 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 ▼
575.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	17	/	2021

Transaction ID : SA11AI.28556

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 1054 Peralta Avenue

City Albany	State CA	Zip Code 94706
----------------	-------------	-------------------

FEC 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 ▼
625.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	16	/	2021

Transaction ID : SA11AI.28557

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 1054 Peralta Avenue

City Albany	State CA	Zip Code 94706
----------------	-------------	-------------------

FEC 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 ▼
675.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	17	/	2021

Transaction ID : SA11AI.28558

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address 1054 Peralta Avenue

City Albany	State CA	Zip Code 94706
----------------	-------------	-------------------

FEC 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 ▼
720.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2021

Transaction ID : SA11AI.28559

Amount of Each Receipt this Period
45.00

Memo Item

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

Mailing Address 1054 Peralta Avenue

City Albany	State CA	Zip Code 94706
----------------	-------------	-------------------

FEC 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 ▼
770.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		17		2021

Transaction ID : SA11AI.28560

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 1054 Peralta Avenue

City Albany	State CA	Zip Code 94706
----------------	-------------	-------------------

FEC 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 ▼
820.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		17		2021

Transaction ID : SA11AI.28561

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	145.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address 93 Mozart Street

City Boston	State MA	Zip Code 02130
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		22		2021

Transaction ID : SA11AI.28585

Amount of Each Receipt this Period
60.00

Memo Item

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

Mailing Address 93 Mozart Street

City Boston	State MA	Zip Code 02130
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		22		2021

Transaction ID : SA11AI.28586

Amount of Each Receipt this Period
30.00

Memo Item

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

Mailing Address 11039 Miners Place

City Nevada City	State CA	Zip Code 95959
---------------------	-------------	-------------------

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

Name of Employer (for Individual) none	Occupation (for Individual) none
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2021

Transaction ID : SA11AI.28591

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	115.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 191
	<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	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Milroy, Marjorie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11039 Miners Place
 City Nevada City State CA Zip Code 95959
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) none Occupation (for Individual) none
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **10 / 10 / 2021**
Transaction ID : SA11AI.28592
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Milroy, Marjorie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11039 Miners Place
 City Nevada City State CA Zip Code 95959
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) none Occupation (for Individual) none
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **11 / 10 / 2021**
Transaction ID : SA11AI.28593
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Milroy, Marjorie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11039 Miners Place
 City Nevada City State CA Zip Code 95959
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) none Occupation (for Individual) none
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **12 / 10 / 2021**
Transaction ID : SA11AI.28594
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address 108 Brook Rd

City Pittsford	State NY	Zip Code 14534
-------------------	-------------	-------------------

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

Name of Employer (for Individual) self	Occupation (for Individual) healthcare
---	---

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		2021

Transaction ID : SA11AI.28651

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 108 Brook Rd

City Pittsford	State NY	Zip Code 14534
-------------------	-------------	-------------------

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

Name of Employer (for Individual) self	Occupation (for Individual) healthcare
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		07		2021

Transaction ID : SA11AI.28652

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 108 Brook Rd

City Pittsford	State NY	Zip Code 14534
-------------------	-------------	-------------------

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

Name of Employer (for Individual) self	Occupation (for Individual) healthcare
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2021

Transaction ID : SA11AI.28653

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address 108 Brook Rd

City Pittsford	State NY	Zip Code 14534
-------------------	-------------	-------------------

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

Name of Employer (for Individual) self	Occupation (for Individual) healthcare
---	---

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
10		07		2021

Transaction ID : SA11AI.28654

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 108 Brook Rd

City Pittsford	State NY	Zip Code 14534
-------------------	-------------	-------------------

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

Name of Employer (for Individual) self	Occupation (for Individual) healthcare
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2021

Transaction ID : SA11AI.28655

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 108 Brook Rd

City Pittsford	State NY	Zip Code 14534
-------------------	-------------	-------------------

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

Name of Employer (for Individual) self	Occupation (for Individual) healthcare
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		07		2021

Transaction ID : SA11AI.28656

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. O'Loughlin, Leslie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2705 Teckla Blvd
 City Amarillo State TX Zip Code 79106-6048
 FEC 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 07 / 25 / 2021
Transaction ID : SA11AI.28707
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Oelsner, Leslie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1451 Canterbury Rd.
 City Fayetteville State AR Zip Code 72701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) social worker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 07 / 11 / 2021
Transaction ID : SA11AI.28688
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Oelsner, Leslie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1451 Canterbury Rd.
 City Fayetteville State AR Zip Code 72701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) social worker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 11 / 2021
Transaction ID : SA11AI.28689
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 191
	<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	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address 1451 Canterbury Rd.

City Fayetteville	State AR	Zip Code 72701
----------------------	-------------	-------------------

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

Name of Employer (for Individual) self	Occupation (for Individual) social worker
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	18	/	2021

Transaction ID : SA11AI.28690

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 1451 Canterbury Rd.

City Fayetteville	State AR	Zip Code 72701
----------------------	-------------	-------------------

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

Name of Employer (for Individual) self	Occupation (for Individual) social worker
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	11	/	2021

Transaction ID : SA11AI.28691

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 1451 Canterbury Rd.

City Fayetteville	State AR	Zip Code 72701
----------------------	-------------	-------------------

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

Name of Employer (for Individual) self	Occupation (for Individual) social worker
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	25	/	2021

Transaction ID : SA11AI.28692

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address 1451 Canterbury Rd.

City Fayetteville	State AR	Zip Code 72701
----------------------	-------------	-------------------

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

Name of Employer (for Individual) self	Occupation (for Individual) social worker
---	--

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
10		11		2021

Transaction ID : SA11AI.28693

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 1451 Canterbury Rd.

City Fayetteville	State AR	Zip Code 72701
----------------------	-------------	-------------------

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

Name of Employer (for Individual) self	Occupation (for Individual) social worker
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2021

Transaction ID : SA11AI.28694

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 1451 Canterbury Rd.

City Fayetteville	State AR	Zip Code 72701
----------------------	-------------	-------------------

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

Name of Employer (for Individual) self	Occupation (for Individual) social worker
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
640.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2021

Transaction ID : SA11AI.28695

Amount of Each Receipt this Period
90.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	165.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address 1451 Canterbury Rd.

City Fayetteville	State AR	Zip Code 72701
----------------------	-------------	-------------------

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

Name of Employer (for Individual) self	Occupation (for Individual) social worker
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
665.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	11	/	2021

Transaction ID : SA11AI.28696

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 1451 Canterbury Rd.

City Fayetteville	State AR	Zip Code 72701
----------------------	-------------	-------------------

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

Name of Employer (for Individual) self	Occupation (for Individual) social worker
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
690.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2021

Transaction ID : SA11AI.28697

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 1040 Sioux St

City Los Alamos	State NM	Zip Code 87544
--------------------	-------------	-------------------

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

Name of Employer (for Individual) LANL	Occupation (for Individual) research Technologist
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
395.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	05	/	2021

Transaction ID : SA11AI.28745

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Pacheco, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1040 Sioux St
 City Los Alamos State NM Zip Code 87544
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LANL Occupation (for Individual) research Technologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 445.00

Date of Receipt 09 / 09 / 2021
Transaction ID : SA11AI.28746
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Paquette, Elissa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address #11 Pt. Sewall Rd.
 City Wolfeboro State NH Zip Code 03894
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Salmon Press Occupation (for Individual) journalist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 01 / 2021
Transaction ID : SA11AI.28752
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Paquette, Elissa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address #11 Pt. Sewall Rd.
 City Wolfeboro State NH Zip Code 03894
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Salmon Press Occupation (for Individual) journalist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 07 / 11 / 2021
Transaction ID : SA11AI.28753
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Paquette, Elissa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address #11 Pt. Sewall Rd.
 City Wolfeboro State NH Zip Code 03894
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Salmon Press Occupation (for Individual) journalist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 01 / 2021
Transaction ID : SA11AI.28754
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Paquette, Elissa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address #11 Pt. Sewall Rd.
 City Wolfeboro State NH Zip Code 03894
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Salmon Press Occupation (for Individual) journalist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 23 / 2021
Transaction ID : SA11AI.28755
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Paquette, Elissa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address #11 Pt. Sewall Rd.
 City Wolfeboro State NH Zip Code 03894
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Salmon Press Occupation (for Individual) journalist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 01 / 2021
Transaction ID : SA11AI.28756
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 191
	<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	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Paquette, Elissa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address #11 Pt. Sewall Rd.
 City Wolfeboro State NH Zip Code 03894
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Salmon Press Occupation (for Individual) journalist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 01 / 2021
Transaction ID : SA11AI.28757
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Paquette, Elissa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address #11 Pt. Sewall Rd.
 City Wolfeboro State NH Zip Code 03894
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Salmon Press Occupation (for Individual) journalist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 11 / 01 / 2021
Transaction ID : SA11AI.28758
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Paquette, Elissa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address #11 Pt. Sewall Rd.
 City Wolfeboro State NH Zip Code 03894
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Salmon Press Occupation (for Individual) journalist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 12 / 01 / 2021
Transaction ID : SA11AI.28759
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 191
	<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	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Parr, Carol, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 Bay Tree Lane
 City Mill Valley State CA Zip Code 94941
 FEC 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 ▼ 425.00

Date of Receipt 07 / 09 / 2021
Transaction ID : SA11AI.28763
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Parr, Carol, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 Bay Tree Lane
 City Mill Valley State CA Zip Code 94941
 FEC 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 ▼ 475.00

Date of Receipt 07 / 23 / 2021
Transaction ID : SA11AI.28764
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Paul, Edward, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23 Mitchell Road
 City Port Washington State NY Zip Code 11050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 07 / 07 / 2021
Transaction ID : SA11AI.28776
 Amount of Each Receipt this Period 75.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Paul, Edward, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23 Mitchell Road
 City Port Washington State NY Zip Code 11050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 07 / 2021
Transaction ID : SA11AI.28777
 Amount of Each Receipt this Period 75.00
 Memo Item

B. Paul, Edward, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23 Mitchell Road
 City Port Washington State NY Zip Code 11050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 09 / 07 / 2021
Transaction ID : SA11AI.28778
 Amount of Each Receipt this Period 75.00
 Memo Item

C. Paul, Edward, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23 Mitchell Road
 City Port Washington State NY Zip Code 11050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 07 / 2021
Transaction ID : SA11AI.28779
 Amount of Each Receipt this Period 75.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Perrigo, Carolyn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 106 Ticino Rd
 City New Bern State NC Zip Code 28562
 FEC 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 ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2021
Transaction ID : SA11AI.28799
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. Perrigo, Carolyn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 106 Ticino Rd
 City New Bern State NC Zip Code 28562
 FEC 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
 10 / 30 / 2021
Transaction ID : SA11AI.28800
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. Perrigo, Carolyn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 106 Ticino Rd
 City New Bern State NC Zip Code 28562
 FEC 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 ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2021
Transaction ID : SA11AI.28801
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Perrigo, Carolyn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 106 Ticino Rd
 City New Bern State NC Zip Code 28562
 FEC 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 30 / 2021
Transaction ID : SA11AI.28802
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. Perry, Elizabeth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 872 Allen Street
 City Dartmouth State MA Zip Code 02747
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Self Occupation (for Individual) Artist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 17 / 2021
Transaction ID : SA11AI.28807
 Amount of Each Receipt this Period
 30.00
 Memo Item

C. Perry, Elizabeth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 872 Allen Street
 City Dartmouth State MA Zip Code 02747
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Self Occupation (for Individual) Artist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2021
Transaction ID : SA11AI.28808
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 191
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Perry, Elizabeth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 872 Allen Street
 City Dartmouth State MA Zip Code 02747
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Artist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 17 / 2021
Transaction ID : SA11AI.28809
 Amount of Each Receipt this Period 30.00
 Memo Item

B. Perry, Elizabeth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 872 Allen Street
 City Dartmouth State MA Zip Code 02747
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Artist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 17 / 2021
Transaction ID : SA11AI.28810
 Amount of Each Receipt this Period 30.00
 Memo Item

C. Perry, Elizabeth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 872 Allen Street
 City Dartmouth State MA Zip Code 02747
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Artist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2021
Transaction ID : SA11AI.28811
 Amount of Each Receipt this Period 30.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	90.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Persons, Robert, , ,

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

Mailing Address 2396 Commonwealth Ave

City Auburndale	State MA	Zip Code 02466
--------------------	-------------	-------------------

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

Name of Employer (for Individual) Ameresco Inc.	Occupation (for Individual) Engineer
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
208.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2021

Transaction ID : SA11AI.28815

Amount of Each Receipt this Period
26.00

Memo Item

B. Persons, Robert, , ,

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

Mailing Address 2396 Commonwealth Ave

City Auburndale	State MA	Zip Code 02466
--------------------	-------------	-------------------

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

Name of Employer (for Individual) Ameresco Inc.	Occupation (for Individual) Engineer
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
234.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2021

Transaction ID : SA11AI.28816

Amount of Each Receipt this Period
26.00

Memo Item

C. Persons, Robert, , ,

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

Mailing Address 2396 Commonwealth Ave

City Auburndale	State MA	Zip Code 02466
--------------------	-------------	-------------------

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

Name of Employer (for Individual) Ameresco Inc.	Occupation (for Individual) Engineer
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		21		2021

Transaction ID : SA11AI.28817

Amount of Each Receipt this Period
26.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	78.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Persons, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2396 Commonwealth Ave
 City Auburndale State MA Zip Code 02466
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ameresco Inc. Occupation (for Individual) Engineer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 286.00

Date of Receipt **12 / 21 / 2021**
Transaction ID : SA11AI.28818
 Amount of Each Receipt this Period 26.00
 Memo Item

B. Pollack, Chaya, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1011 Pine Ridge Road
 City Richmond State VA Zip Code 23226
 FEC 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 ▼ 300.00

Date of Receipt **07 / 05 / 2021**
Transaction ID : SA11AI.28843
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Pollack, Chaya, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1011 Pine Ridge Road
 City Richmond State VA Zip Code 23226
 FEC 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 ▼ 400.00

Date of Receipt **07 / 23 / 2021**
Transaction ID : SA11AI.28844
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	151.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 104 OF 191
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address 1011 Pine Ridge Road

City Richmond	State VA	Zip Code 23226
------------------	-------------	-------------------

FEC 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 ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		03		2021

Transaction ID : SA11AI.28845

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 1011 Pine Ridge Road

City Richmond	State VA	Zip Code 23226
------------------	-------------	-------------------

FEC 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 ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		05		2021

Transaction ID : SA11AI.28846

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 1011 Pine Ridge Road

City Richmond	State VA	Zip Code 23226
------------------	-------------	-------------------

FEC 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 ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2021

Transaction ID : SA11AI.28847

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Pollack, Chaya, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1011 Pine Ridge Road
 City Richmond State VA Zip Code 23226
 FEC 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 ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 05 / 2021
Transaction ID : SA11AI.28848
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. Pomeroy, Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 East End Ave
 City New York State NY Zip Code 10028
 FEC 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 ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2021
Transaction ID : SA11AI.28855
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. Pomeroy, Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 East End Ave
 City New York State NY Zip Code 10028
 FEC 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 ▼ 245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2021
Transaction ID : SA11AI.28856
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Pomeroy, Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 East End Ave
 City New York State NY Zip Code 10028
 FEC 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 ▼ 295.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 08 / 2021
Transaction ID : SA11AI.28857
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Pomeroy, Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 East End Ave
 City New York State NY Zip Code 10028
 FEC 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 ▼ 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2021
Transaction ID : SA11AI.28858
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Pomeroy, Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 East End Ave
 City New York State NY Zip Code 10028
 FEC 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 ▼ 345.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2021
Transaction ID : SA11AI.28859
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 107 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Pomeroy, Ellen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 East End Ave
 City New York State NY Zip Code 10028
 FEC 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 ▼ 370.00

Date of Receipt **12 / 29 / 2021**
Transaction ID : SA11AI.28860
 Amount of Each Receipt this Period 25.00
 Memo Item

B. raizman, dorothy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 144 Kline Road
 City Ligonier State PA Zip Code 15658
 FEC 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 ▼ 1874.00

Date of Receipt **07 / 12 / 2021**
Transaction ID : SA11AI.28885
 Amount of Each Receipt this Period 186.00
 Memo Item

C. raizman, dorothy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 144 Kline Road
 City Ligonier State PA Zip Code 15658
 FEC 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 ▼ 1899.00

Date of Receipt **07 / 13 / 2021**
Transaction ID : SA11AI.28886
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	236.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address 144 Kline Road

City Ligonier	State PA	Zip Code 15658
------------------	-------------	-------------------

FEC 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 ▼
1924.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		13		2021

Transaction ID : SA11AI.28887

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 144 Kline Road

City Ligonier	State PA	Zip Code 15658
------------------	-------------	-------------------

FEC 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 ▼
2174.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2021

Transaction ID : SA11AI.28888

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 144 Kline Road

City Ligonier	State PA	Zip Code 15658
------------------	-------------	-------------------

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

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2424.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2021

Transaction ID : SA11AI.28889

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	525.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address 144 Kline Road

City Ligonier	State PA	Zip Code 15658
------------------	-------------	-------------------

FEC 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 ▼
2449.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2021

Transaction ID : SA11AI.28890

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 144 Kline Road

City Ligonier	State PA	Zip Code 15658
------------------	-------------	-------------------

FEC 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 ▼
2474.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2021

Transaction ID : SA11AI.28891

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 144 Kline Road

City Ligonier	State PA	Zip Code 15658
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2499.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		13		2021

Transaction ID : SA11AI.28892

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 110 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address 144 Kline Road

City Ligonier	State PA	Zip Code 15658
------------------	-------------	-------------------

FEC 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 ▼
2524.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	13	/	2021

Transaction ID : SA11AI.28893

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 26 Tunnel Road

City Berkeley	State CA	Zip Code 94705
------------------	-------------	-------------------

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

Name of Employer (for Individual) none	Occupation (for Individual) retired
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
395.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	19	/	2021

Transaction ID : SA11AI.28911

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 26 Tunnel Road

City Berkeley	State CA	Zip Code 94705
------------------	-------------	-------------------

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

Name of Employer (for Individual) none	Occupation (for Individual) retired
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
415.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	28	/	2021

Transaction ID : SA11AI.28912

Amount of Each Receipt this Period
20.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	70.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 111 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Resnikoff, Rachel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26 Tunnel Road
 City Berkeley State CA Zip Code 94705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) none Occupation (for Individual) retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 08 / 19 / 2021
Transaction ID : SA11AI.28913
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Resnikoff, Rachel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26 Tunnel Road
 City Berkeley State CA Zip Code 94705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) none Occupation (for Individual) retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt 08 / 28 / 2021
Transaction ID : SA11AI.28914
 Amount of Each Receipt this Period 20.00
 Memo Item

C. Resnikoff, Rachel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26 Tunnel Road
 City Berkeley State CA Zip Code 94705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) none Occupation (for Individual) retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt 09 / 16 / 2021
Transaction ID : SA11AI.28915
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 112 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address 26 Tunnel Road

City Berkeley	State CA	Zip Code 94705
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) none	Occupation (for Individual) retired
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
510.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2021

Transaction ID : SA11AI.28916

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 26 Tunnel Road

City Berkeley	State CA	Zip Code 94705
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) none	Occupation (for Individual) retired
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
535.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2021

Transaction ID : SA11AI.28917

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 26 Tunnel Road

City Berkeley	State CA	Zip Code 94705
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) none	Occupation (for Individual) retired
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
555.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2021

Transaction ID : SA11AI.28918

Amount of Each Receipt this Period
20.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	70.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 113 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address 26 Tunnel Road

City Berkeley	State CA	Zip Code 94705
------------------	-------------	-------------------

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

Name of Employer (for Individual) none	Occupation (for Individual) retired
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
580.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2021

Transaction ID : SA11AI.28919

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 26 Tunnel Road

City Berkeley	State CA	Zip Code 94705
------------------	-------------	-------------------

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

Name of Employer (for Individual) none	Occupation (for Individual) retired
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2021

Transaction ID : SA11AI.28920

Amount of Each Receipt this Period
20.00

Memo Item

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

Mailing Address 26 Tunnel Road

City Berkeley	State CA	Zip Code 94705
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) none	Occupation (for Individual) retired
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
625.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		19		2021

Transaction ID : SA11AI.28921

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	70.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 114 OF 191
<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

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address 26 Tunnel Road

City Berkeley	State CA	Zip Code 94705
------------------	-------------	-------------------

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

Name of Employer (for Individual) none	Occupation (for Individual) retired
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
645.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2021

Transaction ID : SA11AI.28922

Amount of Each Receipt this Period
20.00

Memo Item

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

Mailing Address 26 Tunnel Road

City Berkeley	State CA	Zip Code 94705
------------------	-------------	-------------------

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

Name of Employer (for Individual) none	Occupation (for Individual) retired
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
670.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	19	/	2021

Transaction ID : SA11AI.28923

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 26 Tunnel Road

City Berkeley	State CA	Zip Code 94705
------------------	-------------	-------------------

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

Name of Employer (for Individual) none	Occupation (for Individual) retired
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
690.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	28	/	2021

Transaction ID : SA11AI.28924

Amount of Each Receipt this Period
20.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	65.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 115 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address P.O. Box 983

City Salado	State TX	Zip Code 76571
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) self	Occupation (for Individual) futures trader
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	17	/	2021

Transaction ID : SA11AI.28935

Amount of Each Receipt this Period
30.00

Memo Item

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

Mailing Address P.O. Box 983

City Salado	State TX	Zip Code 76571
----------------	-------------	-------------------

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

Name of Employer (for Individual) self	Occupation (for Individual) futures trader
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	29	/	2021

Transaction ID : SA11AI.28936

Amount of Each Receipt this Period
30.00

Memo Item

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

Mailing Address P.O. Box 983

City Salado	State TX	Zip Code 76571
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) self	Occupation (for Individual) futures trader
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2021

Transaction ID : SA11AI.28937

Amount of Each Receipt this Period
30.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	90.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 116 OF 191
<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

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address P.O. Box 983

City Salado	State TX	Zip Code 76571
----------------	-------------	-------------------

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

Name of Employer (for Individual) self	Occupation (for Individual) futures trader
---	---

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
09	/	17	/	2021

Transaction ID : SA11AI.28938

Amount of Each Receipt this Period
30.00

Memo Item

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

Mailing Address P.O. Box 983

City Salado	State TX	Zip Code 76571
----------------	-------------	-------------------

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

Name of Employer (for Individual) self	Occupation (for Individual) futures trader
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	06	/	2021

Transaction ID : SA11AI.28939

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address P.O. Box 983

City Salado	State TX	Zip Code 76571
----------------	-------------	-------------------

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

Name of Employer (for Individual) self	Occupation (for Individual) futures trader
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
355.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	17	/	2021

Transaction ID : SA11AI.28940

Amount of Each Receipt this Period
30.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 117 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Riecker, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. Box 983
 City Salado State TX Zip Code 76571
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) futures trader
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt
 11 / 17 / 2021
Transaction ID : SA11AI.28941
 Amount of Each Receipt this Period 30.00
 Memo Item

B. Riecker, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. Box 983
 City Salado State TX Zip Code 76571
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) futures trader
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 415.00

Date of Receipt
 12 / 17 / 2021
Transaction ID : SA11AI.28942
 Amount of Each Receipt this Period 30.00
 Memo Item

C. Rosenbaum, Barry, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3117 Pearl Street
 City Santa Monica State CA Zip Code 90405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) none Occupation (for Individual) none
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 11 / 09 / 2021
Transaction ID : SA11AI.28986
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 118 OF 191
	<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	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address 3117 Pearl Street

City Santa Monica	State CA	Zip Code 90405
----------------------	-------------	-------------------

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

Name of Employer (for Individual) none	Occupation (for Individual) none
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		09		2021

Transaction ID : SA11AI.28987

Amount of Each Receipt this Period
20.00

Memo Item

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

Mailing Address 760 Lauraland Dr S

City Columbus	State OH	Zip Code 43214
------------------	-------------	-------------------

FEC 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 ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2021

Transaction ID : SA11AI.28988

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 760 Lauraland Dr S

City Columbus	State OH	Zip Code 43214
------------------	-------------	-------------------

FEC 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 ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		14		2021

Transaction ID : SA11AI.28989

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	70.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 119 OF 191
<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

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address 760 Lauraland Dr S

City Columbus	State OH	Zip Code 43214
------------------	-------------	-------------------

FEC 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 ▼
285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	23	/	2021

Transaction ID : SA11AI.28990

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 516 N. Francisco Ave.

City unit C	State CA	Zip Code 90277
----------------	-------------	-------------------

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

Name of Employer (for Individual) self	Occupation (for Individual) musician
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	08	/	2021

Transaction ID : SA11AI.29014

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 516 N. Francisco Ave.

City unit C	State CA	Zip Code 90277
----------------	-------------	-------------------

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

Name of Employer (for Individual) self	Occupation (for Individual) musician
---	---

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
09	/	13	/	2021

Transaction ID : SA11AI.29015

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 120 OF 191
<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

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Safier, Renee, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 516 N. Francisco Ave.
 City unit C State CA Zip Code 90277
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) musician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 13 / 2021
Transaction ID : SA11AI.29016
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. Safier, Renee, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 516 N. Francisco Ave.
 City unit C State CA Zip Code 90277
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) musician
 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
 11 / 13 / 2021
Transaction ID : SA11AI.29017
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. Safier, Renee, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 516 N. Francisco Ave.
 City unit C State CA Zip Code 90277
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) musician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2021
Transaction ID : SA11AI.29018
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 121 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Santos, Dave, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 23rd Ave.
 City San Mateo State CA Zip Code 94403
 FEC 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 ▼ 208.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2021
Transaction ID : SA11AI.29030
 Amount of Each Receipt this Period 18.00
 Memo Item

B. Santos, Dave, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 23rd Ave.
 City San Mateo State CA Zip Code 94403
 FEC 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 ▼ 226.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 22 / 2021
Transaction ID : SA11AI.29031
 Amount of Each Receipt this Period 18.00
 Memo Item

C. Santos, Dave, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 23rd Ave.
 City San Mateo State CA Zip Code 94403
 FEC 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 ▼ 256.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 22 / 2021
Transaction ID : SA11AI.29032
 Amount of Each Receipt this Period 30.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	66.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 122 OF 191
<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

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Santos, Dave, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 23rd Ave.
 City San Mateo State CA Zip Code 94403
 FEC 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 ▼ 274.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 02 / 2021
Transaction ID : SA11AI.29033
 Amount of Each Receipt this Period 18.00
 Memo Item

B. Santos, Dave, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 23rd Ave.
 City San Mateo State CA Zip Code 94403
 FEC 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 ▼ 304.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2021
Transaction ID : SA11AI.29034
 Amount of Each Receipt this Period 30.00
 Memo Item

C. Santos, Dave, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 23rd Ave.
 City San Mateo State CA Zip Code 94403
 FEC 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 ▼ 334.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 05 / 2021
Transaction ID : SA11AI.29035
 Amount of Each Receipt this Period 30.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	78.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 123 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Santos, Dave, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 23rd Ave.
 City San Mateo State CA Zip Code 94403
 FEC 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 ▼ 364.00

Date of Receipt 10 / 10 / 2021
Transaction ID : SA11AI.29036
 Amount of Each Receipt this Period 30.00
 Memo Item

B. Santos, Dave, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 23rd Ave.
 City San Mateo State CA Zip Code 94403
 FEC 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 ▼ 394.00

Date of Receipt 10 / 16 / 2021
Transaction ID : SA11AI.29037
 Amount of Each Receipt this Period 30.00
 Memo Item

C. Santos, Dave, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 23rd Ave.
 City San Mateo State CA Zip Code 94403
 FEC 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 ▼ 424.00

Date of Receipt 10 / 19 / 2021
Transaction ID : SA11AI.29038
 Amount of Each Receipt this Period 30.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 90.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 124 OF 191
	<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	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Santos, Dave, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 23rd Ave.
 City San Mateo State CA Zip Code 94403
 FEC 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 ▼ 454.00

Date of Receipt
 10 / 23 / 2021
Transaction ID : SA11AI.29039
 Amount of Each Receipt this Period 30.00
 Memo Item

B. Santos, Dave, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 23rd Ave.
 City San Mateo State CA Zip Code 94403
 FEC 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 ▼ 484.00

Date of Receipt
 10 / 27 / 2021
Transaction ID : SA11AI.29040
 Amount of Each Receipt this Period 30.00
 Memo Item

C. Santos, Dave, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 23rd Ave.
 City San Mateo State CA Zip Code 94403
 FEC 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 ▼ 514.00

Date of Receipt
 10 / 29 / 2021
Transaction ID : SA11AI.29041
 Amount of Each Receipt this Period 30.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	90.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 125 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address 358 12th Street #1L

City Brooklyn	State NY	Zip Code 11215
------------------	-------------	-------------------

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

Name of Employer (for Individual) Therapists of NY	Occupation (for Individual) Psychologist
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		14		2021

Transaction ID : SA11AI.29047

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 358 12th Street #1L

City Brooklyn	State NY	Zip Code 11215
------------------	-------------	-------------------

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

Name of Employer (for Individual) Therapists of NY	Occupation (for Individual) Psychologist
---	---

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
10		14		2021

Transaction ID : SA11AI.29048

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 358 12th Street #1L

City Brooklyn	State NY	Zip Code 11215
------------------	-------------	-------------------

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

Name of Employer (for Individual) Therapists of NY	Occupation (for Individual) Psychologist
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		14		2021

Transaction ID : SA11AI.29049

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 126 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address 358 12th Street #1L

City Brooklyn	State NY	Zip Code 11215
------------------	-------------	-------------------

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

Name of Employer (for Individual) Therapists of NY	Occupation (for Individual) Psychologist
---	---

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
12	/	14	/	2021

Transaction ID : SA11AI.29050

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 5309 Cameron Dr. NW

City Rochester	State MN	Zip Code 55901
-------------------	-------------	-------------------

FEC 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 ▼
380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	08	/	2021

Transaction ID : SA11AI.29067

Amount of Each Receipt this Period
45.00

Memo Item

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

Mailing Address 5309 Cameron Dr. NW

City Rochester	State MN	Zip Code 55901
-------------------	-------------	-------------------

FEC 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 ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2021

Transaction ID : SA11AI.29068

Amount of Each Receipt this Period
45.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	115.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 127 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Schmidt, Annie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5309 Cameron Dr. NW
 City Rochester State MN Zip Code 55901
 FEC 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 ▼ 470.00

Date of Receipt
 08 / 09 / 2021
Transaction ID : SA11AI.29069
 Amount of Each Receipt this Period 45.00
 Memo Item

B. Schmidt, Annie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5309 Cameron Dr. NW
 City Rochester State MN Zip Code 55901
 FEC 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 ▼ 515.00

Date of Receipt
 09 / 03 / 2021
Transaction ID : SA11AI.29070
 Amount of Each Receipt this Period 45.00
 Memo Item

C. Schmidt, Annie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5309 Cameron Dr. NW
 City Rochester State MN Zip Code 55901
 FEC 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 ▼ 560.00

Date of Receipt
 10 / 17 / 2021
Transaction ID : SA11AI.29071
 Amount of Each Receipt this Period 45.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	135.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 128 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address 5309 Cameron Dr. NW

City Rochester	State MN	Zip Code 55901
-------------------	-------------	-------------------

FEC 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 ▼
605.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2021

Transaction ID : SA11AI.29072

Amount of Each Receipt this Period
45.00

Memo Item

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

Mailing Address 5309 Cameron Dr. NW

City Rochester	State MN	Zip Code 55901
-------------------	-------------	-------------------

FEC 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 ▼
665.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		09		2021

Transaction ID : SA11AI.29073

Amount of Each Receipt this Period
60.00

Memo Item

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

Mailing Address 5309 Cameron Dr. NW

City Rochester	State MN	Zip Code 55901
-------------------	-------------	-------------------

FEC 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 ▼
710.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		13		2021

Transaction ID : SA11AI.29074

Amount of Each Receipt this Period
45.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 129 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address 5309 Cameron Dr. NW

City Rochester	State MN	Zip Code 55901
-------------------	-------------	-------------------

FEC 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 ▼
738.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2021

Transaction ID : SA11AI.29075

Amount of Each Receipt this Period
28.00

Memo Item

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

Mailing Address 5309 Cameron Dr. NW

City Rochester	State MN	Zip Code 55901
-------------------	-------------	-------------------

FEC 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 ▼
788.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		25		2021

Transaction ID : SA11AI.29076

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 5309 Cameron Dr. NW

City Rochester	State MN	Zip Code 55901
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FEC 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 ▼
848.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		27		2021

Transaction ID : SA11AI.29077

Amount of Each Receipt this Period
60.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	138.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 130 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Schroeder, Cynthia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1844 E 11th Ave.
 City Spokane State WA Zip Code 99202
 FEC 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 ▼ 225.00

Date of Receipt **09 / 19 / 2021**
Transaction ID : SA11AI.29085
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Schroeder, Cynthia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1844 E 11th Ave.
 City Spokane State WA Zip Code 99202
 FEC 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 **10 / 19 / 2021**
Transaction ID : SA11AI.29086
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Schroeder, Cynthia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1844 E 11th Ave.
 City Spokane State WA Zip Code 99202
 FEC 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 ▼ 275.00

Date of Receipt **11 / 19 / 2021**
Transaction ID : SA11AI.29087
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 131 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Schroeder, Cynthia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1844 E 11th Ave.
 City Spokane State WA Zip Code 99202
 FEC 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 ▼ 300.00

Date of Receipt **12 / 25 / 2021**
Transaction ID : SA11AI.29088
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Sherman, Karen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2830 Lytton Street
 City San Diego State CA Zip Code 92110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not employed Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **07 / 24 / 2021**
Transaction ID : SA11AI.29131
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Sherman, Karen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2830 Lytton Street
 City San Diego State CA Zip Code 92110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not employed Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **08 / 24 / 2021**
Transaction ID : SA11AI.29132
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 132 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address 545 Woodford

City Missoula	State MT	Zip Code 59801
------------------	-------------	-------------------

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

Name of Employer (for Individual) Simply Vitamins	Occupation (for Individual) retail clerk
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2021

Transaction ID : SA11AI.29163

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 545 Woodford

City Missoula	State MT	Zip Code 59801
------------------	-------------	-------------------

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

Name of Employer (for Individual) Simply Vitamins	Occupation (for Individual) retail clerk
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2021

Transaction ID : SA11AI.29164

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 4655 Haymarket

City Columbus	State OH	Zip Code 43220
------------------	-------------	-------------------

FEC 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 ▼
3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		11		2021

Transaction ID : SA11AI.29170

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 133 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address 4655 Haymarket

City Columbus	State OH	Zip Code 43220
------------------	-------------	-------------------

FEC 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 ▼
3250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		22		2021

Transaction ID : SA11AI.29171

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 4655 Haymarket

City Columbus	State OH	Zip Code 43220
------------------	-------------	-------------------

FEC 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 ▼
3450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		23		2021

Transaction ID : SA11AI.29172

Amount of Each Receipt this Period
200.00

Memo Item

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

Mailing Address 4655 Haymarket

City Columbus	State OH	Zip Code 43220
------------------	-------------	-------------------

FEC 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 ▼
3950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		07		2021

Transaction ID : SA11AI.29173

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	950.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 134 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address 4655 Haymarket

City Columbus	State OH	Zip Code 43220
------------------	-------------	-------------------

FEC 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 ▼
4450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2021

Transaction ID : SA11AI.29174

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 4655 Haymarket

City Columbus	State OH	Zip Code 43220
------------------	-------------	-------------------

FEC 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 ▼
4650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		23		2021

Transaction ID : SA11AI.29175

Amount of Each Receipt this Period
200.00

Memo Item

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

Mailing Address 4655 Haymarket

City Columbus	State OH	Zip Code 43220
------------------	-------------	-------------------

FEC 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 ▼
4900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2021

Transaction ID : SA11AI.29176

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	950.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 135 OF 191
<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

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Smudz, Susan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4655 Haymarket
 City Columbus State OH Zip Code 43220
 FEC 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 ▼ 5150.00

Date of Receipt
 08 / 30 / 2021
Transaction ID : SA11AI.29177
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Smudz, Susan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4655 Haymarket
 City Columbus State OH Zip Code 43220
 FEC 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 ▼ 5400.00

Date of Receipt
 09 / 08 / 2021
Transaction ID : SA11AI.29178
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Smudz, Susan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4655 Haymarket
 City Columbus State OH Zip Code 43220
 FEC 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 ▼ 5500.00

Date of Receipt
 09 / 13 / 2021
Transaction ID : SA11AI.29179
 Amount of Each Receipt this Period 100.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 136 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address 4655 Haymarket

City Columbus	State OH	Zip Code 43220
------------------	-------------	-------------------

FEC 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 ▼
5700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2021

Transaction ID : SA11AI.29180

Amount of Each Receipt this Period
200.00

Memo Item

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

Mailing Address 4655 Haymarket

City Columbus	State OH	Zip Code 43220
------------------	-------------	-------------------

FEC 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 ▼
5950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2021

Transaction ID : SA11AI.29181

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 4655 Haymarket

City Columbus	State OH	Zip Code 43220
------------------	-------------	-------------------

FEC 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 ▼
6450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2021

Transaction ID : SA11AI.29182

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	950.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 137 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address 4655 Haymarket

City Columbus	State OH	Zip Code 43220
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FEC 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 ▼
6950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2021

Transaction ID : SA11AI.29183

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 4655 Haymarket

City Columbus	State OH	Zip Code 43220
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FEC 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 ▼
7050.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2021

Transaction ID : SA11AI.29184

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 4655 Haymarket

City Columbus	State OH	Zip Code 43220
------------------	-------------	-------------------

FEC 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 ▼
7250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2021

Transaction ID : SA11AI.29185

Amount of Each Receipt this Period
200.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 138 OF 191
<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

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address 4655 Haymarket

City Columbus	State OH	Zip Code 43220
------------------	-------------	-------------------

FEC 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 ▼
7625.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2021

Transaction ID : SA11AI.29186

Amount of Each Receipt this Period

375.00

 Memo Item

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

Mailing Address 4655 Haymarket

City Columbus	State OH	Zip Code 43220
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FEC 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 ▼
7825.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2021

Transaction ID : SA11AI.29187

Amount of Each Receipt this Period

200.00

 Memo Item

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

Mailing Address 4655 Haymarket

City Columbus	State OH	Zip Code 43220
------------------	-------------	-------------------

FEC 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 ▼
8025.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2021

Transaction ID : SA11AI.29188

Amount of Each Receipt this Period

200.00

 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	775.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 139 OF 191
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Smudz, Susan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4655 Haymarket
 City Columbus State OH Zip Code 43220
 FEC 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 ▼ 8275.00

Date of Receipt 12 / 18 / 2021
Transaction ID : SA11AI.29189
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Solez, Elaine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8711 Saskatchewan Drive
 City Edmonton State ZZ Zip Code
 FEC 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 ▼ 225.00

Date of Receipt 10 / 22 / 2021
Transaction ID : SA11AI.29193
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Solez, Elaine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8711 Saskatchewan Drive
 City Edmonton State ZZ Zip Code
 FEC 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 11 / 22 / 2021
Transaction ID : SA11AI.29194
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 140 OF 191
	<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	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address 8711 Saskatchewan Drive

City Edmonton	State ZZ	Zip Code
------------------	-------------	----------

FEC 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 ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	22	/	2021

Transaction ID : SA11AI.29195

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 24561 La Hermosa

City Laguna Niguel	State CA	Zip Code 92677
-----------------------	-------------	-------------------

FEC 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 ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	23	/	2021

Transaction ID : SA11AI.29220

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 24561 La Hermosa

City Laguna Niguel	State CA	Zip Code 92677
-----------------------	-------------	-------------------

FEC 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 ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	17	/	2021

Transaction ID : SA11AI.29221

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1025.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 141 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Steele, Mary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24561 La Hermosa
 City Laguna Niguel State CA Zip Code 92677
 FEC 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 ▼ 2000.00

Date of Receipt **10 / 16 / 2021**
Transaction ID : SA11AI.29222
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Stegman, Cathy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8748 old Indian hill rd
 City Cincinnati State OH Zip Code 45243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Homemaker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 10 / 2021**
Transaction ID : SA11AI.29224
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Stegman, Cathy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8748 old Indian hill rd
 City Cincinnati State OH Zip Code 45243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Homemaker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **12 / 27 / 2021**
Transaction ID : SA11AI.29225
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 142 OF 191
	<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	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Steinbauer, Jerome, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 221 S Owen Drive
 City Madison State WI Zip Code 53705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Singlewire Software Occupation (for Individual) CTO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt **07 / 04 / 2021**
Transaction ID : SA11AI.29233
 Amount of Each Receipt this Period 200.00
 Memo Item

B. Steinbauer, Jerome, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 221 S Owen Drive
 City Madison State WI Zip Code 53705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Singlewire Software Occupation (for Individual) CTO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt **08 / 04 / 2021**
Transaction ID : SA11AI.29234
 Amount of Each Receipt this Period 200.00
 Memo Item

C. Steinbauer, Jerome, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 221 S Owen Drive
 City Madison State WI Zip Code 53705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Singlewire Software Occupation (for Individual) CTO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt **09 / 04 / 2021**
Transaction ID : SA11AI.29235
 Amount of Each Receipt this Period 200.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 143 OF 191
	<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	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Steinhauer, Jerome, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 221 S Owen Drive
 City Madison State WI Zip Code 53705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Singlewire Software Occupation (for Individual) CTO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1650.00

Date of Receipt 10 / 04 / 2021
Transaction ID : SA11AI.29236
 Amount of Each Receipt this Period 200.00
 Memo Item

B. Steinhauer, Jerome, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 221 S Owen Drive
 City Madison State WI Zip Code 53705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Singlewire Software Occupation (for Individual) CTO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1850.00

Date of Receipt 11 / 04 / 2021
Transaction ID : SA11AI.29237
 Amount of Each Receipt this Period 200.00
 Memo Item

C. Steinhauer, Jerome, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 221 S Owen Drive
 City Madison State WI Zip Code 53705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Singlewire Software Occupation (for Individual) CTO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2050.00

Date of Receipt 12 / 04 / 2021
Transaction ID : SA11AI.29238
 Amount of Each Receipt this Period 200.00
 Memo Item

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 144 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address 8 Blanchard

City irvine	State CA	Zip Code 92603
----------------	-------------	-------------------

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

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	01	/	2021

Transaction ID : SA11AI.29261

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 8 Blanchard

City irvine	State CA	Zip Code 92603
----------------	-------------	-------------------

FEC 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
10	/	01	/	2021

Transaction ID : SA11AI.29262

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 8 Blanchard

City irvine	State CA	Zip Code 92603
----------------	-------------	-------------------

FEC 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 ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2021

Transaction ID : SA11AI.29263

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 145 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address 8 Blanchard

City irvine	State CA	Zip Code 92603
----------------	-------------	-------------------

FEC 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 ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2021

Transaction ID : SA11AI.29264

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 877 Bay Ridge Ave. 6 D

City BROOKLYN	State NY	Zip Code 11220
------------------	-------------	-------------------

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

Name of Employer (for Individual) Sheltering Arms of NY	Occupation (for Individual) Educator
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2021

Transaction ID : SA11AI.29271

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 877 Bay Ridge Ave. 6 D

City BROOKLYN	State NY	Zip Code 11220
------------------	-------------	-------------------

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

Name of Employer (for Individual) Sheltering Arms of NY	Occupation (for Individual) Educator
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2021

Transaction ID : SA11AI.29272

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 146 OF 191
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Stromberg, Betty, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 877 Bay Ridge Ave. 6 D
 City BROOKLYN State NY Zip Code 11220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Sheltering Arms of NY Occupation (for Individual) Educator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 10 / 24 / 2021
Transaction ID : SA11AI.29273
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Stromberg, Betty, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 877 Bay Ridge Ave. 6 D
 City BROOKLYN State NY Zip Code 11220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Sheltering Arms of NY Occupation (for Individual) Educator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 10 / 27 / 2021
Transaction ID : SA11AI.29274
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Strong, Dave, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 113 Carmen Street
 City Halls State TN Zip Code 38040
 FEC 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 ▼ 225.00

Date of Receipt 12 / 17 / 2021
Transaction ID : SA11AI.29280
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 147 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address 7832 Balson

City U City	State MO	Zip Code 63130
----------------	-------------	-------------------

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

Name of Employer (for Individual) st louis community college	Occupation (for Individual) adjunct faculty
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	14	/	2021

Transaction ID : SA11AI.29305

Amount of Each Receipt this Period
30.00

Memo Item

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

Mailing Address 15 Ithaca Circle

City Newton	State MA	Zip Code 02462
----------------	-------------	-------------------

FEC 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	/	24	/	2021

Transaction ID : SA11AI.29309

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 230 Lynx Ct

City Fremont	State CA	Zip Code 94539
-----------------	-------------	-------------------

FEC 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 ▼
290.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	07	/	2021

Transaction ID : SA11AI.29326

Amount of Each Receipt this Period
60.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	190.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 148 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address 230 Lynx Ct

City Fremont	State CA	Zip Code 94539
-----------------	-------------	-------------------

FEC 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 ▼
340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		15		2021

Transaction ID : SA11AI.29327

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 7531 Willow Ln

City Falls church	State VA	Zip Code 22042
----------------------	-------------	-------------------

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

Name of Employer (for Individual) self	Occupation (for Individual) psychologist
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
238.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2021

Transaction ID : SA11AI.29338

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 177 Babcock Street

City Brookline	State MA	Zip Code 02446
-------------------	-------------	-------------------

FEC 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 ▼
222.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		28		2021

Transaction ID : SA11AI.29354

Amount of Each Receipt this Period
22.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	172.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 149 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Verderber, Elsa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1635 Roseland Ave
 City E. Lansing State MI Zip Code 48823-4751
 FEC 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 ▼ 300.00

Date of Receipt 09 / 08 / 2021
Transaction ID : SA11AI.29364
 Amount of Each Receipt this Period 20.00
 Memo Item

B. Warner, Stuart, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45 Center Rd
 City Woodbridge State CT Zip Code 06525
 FEC 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 ▼ 275.00

Date of Receipt 07 / 08 / 2021
Transaction ID : SA11AI.29401
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Weaver, Douglas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4013 April Drive
 City Uniontown State OH Zip Code 44685
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Goodyear Tire Occupation (for Individual) Engineer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 10 / 26 / 2021
Transaction ID : SA11AI.29418
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	145.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 150 OF 191
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Weaver, Douglas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4013 April Drive
 City Uniontown State OH Zip Code 44685
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Goodyear Tire Occupation (for Individual) Engineer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt **12 / 14 / 2021**
Transaction ID : SA11AI.29419
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Witty, Joanne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 77 Columbia Heights
 City Brooklyn State NY Zip Code 11201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Lawyer/Civic Volunteer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **09 / 25 / 2021**
Transaction ID : SA11AI.29498
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Wright, Carolyn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3002 Mill Creek Rd.
 City The Dalles State OR Zip Code 97058
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WA DNR Occupation (for Individual) Natural Area Steward
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt **10 / 23 / 2021**
Transaction ID : SA11AI.29515
 Amount of Each Receipt this Period 30.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	580.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 151 OF 191
(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
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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address 3002 Mill Creek Rd.

City The Dalles	State OR	Zip Code 97058
--------------------	-------------	-------------------

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

Name of Employer (for Individual) WA DNR	Occupation (for Individual) Natural Area Steward
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
248.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	19	/	2021

Transaction ID : SA11AI.29516

Amount of Each Receipt this Period
28.00

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
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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
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Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	28.00
TOTAL This Period (last page this line number only).....▶	40436.92

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 152 OF 191
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. BRADY PAC

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

Mailing Address 918 PENNSYLVANIA AVE SE

City WASHINGTON	State DC	Zip Code 20003
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00674093

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	14	/	2021

Transaction ID : SA11C.29586

Amount of Each Receipt this Period
1500.00

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).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	1500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address PO Box 441146

City
Somerville

State
MA

Zip Code
02144

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			31			2021					

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.29773

Amount of Each Disbursement this Period

[REDACTED] 5294.01

Memo Item

Full Name (Last, First, Middle Initial)

B. Action Squared LLC

Mailing Address 1900 L Street, NW
Suite 900

City
Washington

State
DC

Zip Code
20036

Purpose of Disbursement
Database Management

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
07			07			2021					

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.29622

Amount of Each Disbursement this Period

[REDACTED] 769.14

Memo Item

Full Name (Last, First, Middle Initial)

C. Action Squared LLC

Mailing Address 1900 L Street, NW
Suite 900

City
Washington

State
DC

Zip Code
20036

Purpose of Disbursement
Database Management

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
08			09			2021					

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.29644

Amount of Each Disbursement this Period

[REDACTED] 981.83

Memo Item

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

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

[REDACTED] 7044.98

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial) A. Action Squared LLC		Date of Disbursement MM / DD / YYYY 09 / 07 / 2021
Mailing Address 1900 L Street, NW Suite 900		FEC Identification Number C [] Transaction ID : SB21B.29660 Amount of Each Disbursement this Period [] 1089.15
City Washington	State DC	Zip Code 20036
Purpose of Disbursement Database Management		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Action Squared LLC		Date of Disbursement MM / DD / YYYY 10 / 07 / 2021
Mailing Address 1900 L Street, NW Suite 900		FEC Identification Number C [] Transaction ID : SB21B.29681 Amount of Each Disbursement this Period [] 940.49
City Washington	State DC	Zip Code 20036
Purpose of Disbursement Database Management		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Action Squared LLC		Date of Disbursement MM / DD / YYYY 11 / 08 / 2021
Mailing Address 1900 L Street, NW Suite 900		FEC Identification Number C [] Transaction ID : SB21B.29713 Amount of Each Disbursement this Period [] 1662.82
City Washington	State DC	Zip Code 20036
Purpose of Disbursement Database Management		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 3692.46
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
YOUTH PROGRESSIVE ACTION CATALYST

A. Action Squared LLC

Full Name (Last, First, Middle Initial)

Mailing Address 1900 L Street, NW
Suite 900

City Washington State DC Zip Code 20036

Purpose of Disbursement Database Management

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
12 / 07 / 2021

FEC Identification Number: C

Transaction ID : SB21B.29750

Amount of Each Disbursement this Period: 1930.68

Memo Item

B. Aguayo, Elias C., , ,

Full Name (Last, First, Middle Initial)

Mailing Address 5050 E Garford St.

City Long Beach State CA Zip Code 90815

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
11 / 16 / 2021

FEC Identification Number: C

Transaction ID : SB21B.29734

Amount of Each Disbursement this Period: 280.60

Memo Item

C. Amalgamated Bank

Full Name (Last, First, Middle Initial)

Mailing Address 1825 K Street, N.W

City Washington State DC Zip Code 20006

Purpose of Disbursement Bank Charges

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 28 / 2021

FEC Identification Number: C

Transaction ID : SB21B.29676

Amount of Each Disbursement this Period: 14.41

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2225.69

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial)

A. Amalgamated Bank

Mailing Address 1825 K Street, N.W

City
Washington

State
DC

Zip Code
20006

Purpose of Disbursement
Bank Charges

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			29			2021			

FEC Identification Number

C

Transaction ID : SB21B.29764

Amount of Each Disbursement this Period

12.73

Memo Item

Full Name (Last, First, Middle Initial)

B. Amalgamated Bank

Mailing Address 1825 K Street, N.W

City
Washington

State
DC

Zip Code
20006

Purpose of Disbursement
Bank Charges

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			26			2021			

FEC Identification Number

C

Transaction ID : SB21B.29766

Amount of Each Disbursement this Period

28.36

Memo Item

Full Name (Last, First, Middle Initial)

C. Amalgamated Bank

Mailing Address 1825 K Street, N.W

City
Washington

State
DC

Zip Code
20006

Purpose of Disbursement
Bank Charges

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			27			2021			

FEC Identification Number

C

Transaction ID : SB21B.29766

Amount of Each Disbursement this Period

12.94

Memo Item

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

54.03

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial)

A. Borin, Sofia I, , ,

Mailing Address 13220 Admiral Ave
UNIT G

City Marina Del Rey

State CA

Zip Code 90292

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			12			2021			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.29727

Amount of Each Disbursement this Period

[REDACTED] 300.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Brandes-Krug, Tamar, , ,

Mailing Address 48 Marion St.

City Medford

State MA

Zip Code 02155

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
09			13			2021			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.29664

Amount of Each Disbursement this Period

[REDACTED] 161.50

Memo Item

Full Name (Last, First, Middle Initial)

C. Brown, Jason, , ,

Mailing Address 5110 Cool Hill Rd

City Providence Forge

State VA

Zip Code 23140

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
09			30			2021			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.29678

Amount of Each Disbursement this Period

[REDACTED] 250.00

Memo Item

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

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

[REDACTED] 711.50

[REDACTED]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input 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)
YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial) A. Brown, Jason, , ,			Date of Disbursement MM / DD / YYYY 10 / 13 / 2021	
Mailing Address 5110 Cool Hill Rd			FEC Identification Number C [] Transaction ID : SB21B.29684 Amount of Each Disbursement this Period [] 250.00	
City Providence Forge	State VA	Zip Code 23140	Category/ Type []	
Purpose of Disbursement Strategic Consulting		Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:	<input type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) B. Brown, Jason, , ,			Date of Disbursement MM / DD / YYYY 10 / 27 / 2021	
Mailing Address 5110 Cool Hill Rd			FEC Identification Number C [] Transaction ID : SB21B.29698 Amount of Each Disbursement this Period [] 250.00	
City Providence Forge	State VA	Zip Code 23140	Category/ Type []	
Purpose of Disbursement Strategic Consulting		Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:	<input type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) C. Brown, Jason, , ,			Date of Disbursement MM / DD / YYYY 11 / 10 / 2021	
Mailing Address 5110 Cool Hill Rd			FEC Identification Number C [] Transaction ID : SB21B.29716 Amount of Each Disbursement this Period [] 250.00	
City Providence Forge	State VA	Zip Code 23140	Category/ Type []	
Purpose of Disbursement Strategic Consulting		Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:	<input type="checkbox"/> Memo Item			

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 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)
YOUTH PROGRESSIVE ACTION CATALYST

A. Brown, Jason, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 5110 Cool Hill Rd

City Providence Forge State VA Zip Code 23140

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 23 / 2021

FEC Identification Number: C

Transaction ID : SB21B.29739

Amount of Each Disbursement this Period: 250.00

Memo Item

B. Brown, Jason, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 5110 Cool Hill Rd

City Providence Forge State VA Zip Code 23140

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 09 / 2021

FEC Identification Number: C

Transaction ID : SB21B.29752

Amount of Each Disbursement this Period: 250.00

Memo Item

C. Brown, Jason, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 5110 Cool Hill Rd

City Providence Forge State VA Zip Code 23140

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 22 / 2021

FEC Identification Number: C

Transaction ID : SB21B.29762

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 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)
YOUTH PROGRESSIVE ACTION CATALYST

A. Dominos

Full Name (Last, First, Middle Initial)

Mailing Address 7309 SW 107th Ave

City Miami State FL Zip Code 33173

Purpose of Disbursement Food

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 29 / 2021

FEC Identification Number: C

Transaction ID : SB21B.29706

Amount of Each Disbursement this Period: 90.08

Memo Item

B. Financial Innovations

Full Name (Last, First, Middle Initial)

Mailing Address One Weingeroff Boulevard

City Cranston State RI Zip Code 02910

Purpose of Disbursement Merchandise

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 15 / 2021

FEC Identification Number: C

Transaction ID : SB21B.29628

Amount of Each Disbursement this Period: 25.00

Memo Item

C. Financial Innovations

Full Name (Last, First, Middle Initial)

Mailing Address One Weingeroff Boulevard

City Cranston State RI Zip Code 02910

Purpose of Disbursement Merchandise

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 12 / 2021

FEC Identification Number: C

Transaction ID : SB21B.29643

Amount of Each Disbursement this Period: 35.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 150.08

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial) A. Financial Innovations		Date of Disbursement MM / DD / YYYY 09 / 27 / 2021
Mailing Address One Weingeroff Boulevard		FEC Identification Number C [] Transaction ID : SB21B.29675 Amount of Each Disbursement this Period [] 38.90
City Cranston	State RI	Zip Code 02910
Purpose of Disbursement Merchandise	Category/Type []	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Financial Innovations		Date of Disbursement MM / DD / YYYY 10 / 26 / 2021
Mailing Address One Weingeroff Boulevard		FEC Identification Number C [] Transaction ID : SB21B.29696 Amount of Each Disbursement this Period [] 35.00
City Cranston	State RI	Zip Code 02910
Purpose of Disbursement Merchandise	Category/Type []	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Financial Innovations		Date of Disbursement MM / DD / YYYY 11 / 30 / 2021
Mailing Address One Weingeroff Boulevard		FEC Identification Number C [] Transaction ID : SB21B.29746 Amount of Each Disbursement this Period [] 35.00
City Cranston	State RI	Zip Code 02910
Purpose of Disbursement Merchandise	Category/Type []	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 108.90
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial)

A. Financial Innovations

Mailing Address One Weingeroff Boulevard

City Cranston State RI Zip Code 02910

Purpose of Disbursement
Merchandise

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 16 / 2021

FEC Identification Number

C
Transaction ID : SB21B.29759
Amount of Each Disbursement this Period
35.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Fisch, Abigail A, , ,

Mailing Address 9100 North Branch Drive

City Bethesda State MD Zip Code 20817

Purpose of Disbursement
Strategic Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 05 / 2021

FEC Identification Number

C
Transaction ID : SB21B.29712
Amount of Each Disbursement this Period
375.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Fisch, Abigail A, , ,

Mailing Address 9100 North Branch Drive

City Bethesda State MD Zip Code 20817

Purpose of Disbursement
Strategic Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 06 / 2021

FEC Identification Number

C
Transaction ID : SB21B.29745
Amount of Each Disbursement this Period
375.00

Memo Item

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

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

785.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial) A. Google		Date of Disbursement MM / DD / YYYY 07 / 23 / 2021
Mailing Address 1600 Amphitheatre Parkway		FEC Identification Number C [] Transaction ID : SB21B.29631
City Mountain View	State CA	Zip Code 94043
Purpose of Disbursement Technology Fee		Amount of Each Disbursement this Period [] 2.11
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:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. Google		Date of Disbursement MM / DD / YYYY 08 / 24 / 2021
Mailing Address 1600 Amphitheatre Parkway		FEC Identification Number C [] Transaction ID : SB21B.29649
City Mountain View	State CA	Zip Code 94043
Purpose of Disbursement Technology Fee		Amount of Each Disbursement this Period [] 2.11
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:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. Google		Date of Disbursement MM / DD / YYYY 09 / 24 / 2021
Mailing Address 1600 Amphitheatre Parkway		FEC Identification Number C [] Transaction ID : SB21B.29674
City Mountain View	State CA	Zip Code 94043
Purpose of Disbursement Technology Fee		Amount of Each Disbursement this Period [] 2.11
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:		<input type="checkbox"/> Memo Item

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

[] 6.33

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

[]

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial) A. Google		Date of Disbursement MM / DD / YYYY 10 / 25 / 2021
Mailing Address 1600 Amphitheatre Parkway		FEC Identification Number C [] Transaction ID : SB21B.29693
City Mountain View	State CA	Zip Code 94043
Purpose of Disbursement Technology Fee		Amount of Each Disbursement this Period [] 2.11
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:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. Google		Date of Disbursement MM / DD / YYYY 11 / 24 / 2021
Mailing Address 1600 Amphitheatre Parkway		FEC Identification Number C [] Transaction ID : SB21B.29742
City Mountain View	State CA	Zip Code 94043
Purpose of Disbursement Technology Fee		Amount of Each Disbursement this Period [] 2.11
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:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. Google		Date of Disbursement MM / DD / YYYY 12 / 23 / 2021
Mailing Address 1600 Amphitheatre Parkway		FEC Identification Number C [] Transaction ID : SB21B.29763
City Mountain View	State CA	Zip Code 94043
Purpose of Disbursement Technology Fee		Amount of Each Disbursement this Period [] 2.11
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:		<input type="checkbox"/> Memo Item

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

[] 6.33

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

[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial) A. Guthman, Nick, , ,			Date of Disbursement MM / DD / YYYY 08 / 25 / 2021	
Mailing Address 10913 Lindblade St.				
City Culver City	State CA	Zip Code 90230	FEC Identification Number C [] Transaction ID : SB21B.29652 Amount of Each Disbursement this Period [] 4500.00 <input type="checkbox"/> Memo Item	
Purpose of Disbursement Strategic Consulting		Category/Type []		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial) B. Guthman, Nick, , ,			Date of Disbursement MM / DD / YYYY 08 / 31 / 2021	
Mailing Address 10913 Lindblade St.				
City Culver City	State CA	Zip Code 90230	FEC Identification Number C [] Transaction ID : SB21B.29657 Amount of Each Disbursement this Period [] 1000.00 <input type="checkbox"/> Memo Item	
Purpose of Disbursement Strategic Consulting		Category/Type []		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:				
Full Name (Last, First, Middle Initial) C. Guthman, Nick, , ,			Date of Disbursement MM / DD / YYYY 09 / 20 / 2021	
Mailing Address 10913 Lindblade St.				
City Culver City	State CA	Zip Code 90230	FEC Identification Number C [] Transaction ID : SB21B.29666 Amount of Each Disbursement this Period [] 2500.00 <input type="checkbox"/> Memo Item	
Purpose of Disbursement Strategic Consulting		Category/Type []		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:				
SUBTOTAL of Disbursements This Page (optional)..... ▶			[] 8000.00	
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 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)
YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial) A. Guthman, Nick, , ,		Date of Disbursement MM / DD / YYYY 09 / 29 / 2021	
Mailing Address 10913 Lindblade St.		FEC Identification Number C [] Transaction ID : SB21B.29677 Amount of Each Disbursement this Period [] 355.00	
City Culver City	State CA	Zip Code 90230	Category/ Type []
Purpose of Disbursement Strategic Consulting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>	
State: District:			

Full Name (Last, First, Middle Initial) B. Guthman, Nick, , ,		Date of Disbursement MM / DD / YYYY 10 / 28 / 2021	
Mailing Address 10913 Lindblade St.		FEC Identification Number C [] Transaction ID : SB21B.29702 Amount of Each Disbursement this Period [] 3500.00	
City Culver City	State CA	Zip Code 90230	Category/ Type []
Purpose of Disbursement Strategic Consulting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>	
State: District:			

Full Name (Last, First, Middle Initial) C. Guthman, Nick, , ,		Date of Disbursement MM / DD / YYYY 10 / 29 / 2021	
Mailing Address 10913 Lindblade St.		FEC Identification Number C [] Transaction ID : SB21B.29707 Amount of Each Disbursement this Period [] 355.00	
City Culver City	State CA	Zip Code 90230	Category/ Type []
Purpose of Disbursement Strategic Consulting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>	
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 4210.00
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 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)
YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial) A. Guthman, Nick, , ,		Date of Disbursement MM / DD / YYYY 11 / 29 / 2021	
Mailing Address 10913 Lindblade St.		FEC Identification Number C [] Transaction ID : SB21B.29745 Amount of Each Disbursement this Period [] 355.00	
City Culver City	State CA	Zip Code 90230	Category/ Type []
Purpose of Disbursement Strategic Consulting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. Guthman, Nick, , ,		Date of Disbursement MM / DD / YYYY 12 / 14 / 2021	
Mailing Address 10913 Lindblade St.		FEC Identification Number C [] Transaction ID : SB21B.29758 Amount of Each Disbursement this Period [] 1500.00	
City Culver City	State CA	Zip Code 90230	Category/ Type []
Purpose of Disbursement Strategic Consulting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. Guthman, Nick, , ,		Date of Disbursement MM / DD / YYYY 12 / 30 / 2021	
Mailing Address 10913 Lindblade St.		FEC Identification Number C [] Transaction ID : SB21B.29771 Amount of Each Disbursement this Period [] 1000.00	
City Culver City	State CA	Zip Code 90230	Category/ Type []
Purpose of Disbursement Strategic Consulting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 2855.00
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 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)
YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial) A. Kleine, Aleksia, , ,		Date of Disbursement MM / DD / YYYY 11 / 22 / 2021	
Mailing Address 290 Boston Avenue		FEC Identification Number C [] Transaction ID : SB21B.29738 Amount of Each Disbursement this Period [] 60.00	
City Medford	State MA	Zip Code 02155	Category/ Type []
Purpose of Disbursement Strategic Consulting		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) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) B. Kleine, Aleksia A, , ,		Date of Disbursement MM / DD / YYYY 08 / 13 / 2021	
Mailing Address 103 Oak Harbor Lane		FEC Identification Number C [] Transaction ID : SB21B.29644 Amount of Each Disbursement this Period [] 500.00	
City Cary	State NC	Zip Code 27519	Category/ Type []
Purpose of Disbursement Strategic Consulting		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) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) C. Magallanes LLC		Date of Disbursement MM / DD / YYYY 07 / 12 / 2021	
Mailing Address 4805 S. Langley Ave.		FEC Identification Number C [] Transaction ID : SB21B.29627 Amount of Each Disbursement this Period [] 1250.00	
City Chicago	State IL	Zip Code 60615	Category/ Type []
Purpose of Disbursement Fundraising Consulting		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) ▼		<input type="checkbox"/> Memo Item
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 1810.00
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 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)
YOUTH PROGRESSIVE ACTION CATALYST

A. Magallanes LLC

Full Name (Last, First, Middle Initial)

Mailing Address 4805 S. Langley Ave.

City Chicago State IL Zip Code 60615

Purpose of Disbursement Fundraising Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 29 / 2021

FEC Identification Number: C

Transaction ID : SB21B.29638

Amount of Each Disbursement this Period: 1250.00

Memo Item

B. Magallanes LLC

Full Name (Last, First, Middle Initial)

Mailing Address 4805 S. Langley Ave.

City Chicago State IL Zip Code 60615

Purpose of Disbursement Fundraising Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 07 / 2021

FEC Identification Number: C

Transaction ID : SB21B.29661

Amount of Each Disbursement this Period: 2500.00

Memo Item

C. Magallanes LLC

Full Name (Last, First, Middle Initial)

Mailing Address 4805 S. Langley Ave.

City Chicago State IL Zip Code 60615

Purpose of Disbursement Fundraising Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 22 / 2021

FEC Identification Number: C

Transaction ID : SB21B.29692

Amount of Each Disbursement this Period: 1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 4750.00

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 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)
YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial) A. Martinez, Juan J, , ,		Date of Disbursement MM / DD / YYYY 07 / 08 / 2021	
Mailing Address 1955 Paseo Arena		FEC Identification Number C [] Transaction ID : SB21B.29623 Amount of Each Disbursement this Period [] 16.17	
City El Paso	State TX	Zip Code 79936	Category/ Type []
Purpose of Disbursement Software		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. Paspalis, Matthew P, , ,		Date of Disbursement MM / DD / YYYY 11 / 12 / 2021	
Mailing Address 130 Sycamore St.		FEC Identification Number C [] Transaction ID : SB21B.29722 Amount of Each Disbursement this Period [] 104.00	
City Santa Cruz	State CA	Zip Code 95060	Category/ Type []
Purpose of Disbursement Strategic Consulting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. Reiter, Eliana B., , ,		Date of Disbursement MM / DD / YYYY 11 / 12 / 2021	
Mailing Address 1340 Locust Rd NW		FEC Identification Number C [] Transaction ID : SB21B.29725 Amount of Each Disbursement this Period [] 216.00	
City Washington	State DC	Zip Code 20012	Category/ Type []
Purpose of Disbursement Strategic Consulting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	[] 336.17
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial) A. Reynoso, Maria G, , ,			Date of Disbursement MM / DD / YYYY 07 / 12 / 2021		
Mailing Address 12917 Kerrydale Rd			FEC Identification Number C [] Transaction ID : SB21B.29626		
City Woodbridge	State VA	Zip Code 22193	Amount of Each Disbursement this Period [] 2000.00		
Purpose of Disbursement Strategic Consulting		Candidate Name []	Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:					

Full Name (Last, First, Middle Initial) B. Reynoso, Maria G, , ,			Date of Disbursement MM / DD / YYYY 07 / 23 / 2021		
Mailing Address 12917 Kerrydale Rd			FEC Identification Number C [] Transaction ID : SB21B.29633		
City Woodbridge	State VA	Zip Code 22193	Amount of Each Disbursement this Period [] 2000.00		
Purpose of Disbursement Strategic Consulting		Candidate Name []	Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:					

Full Name (Last, First, Middle Initial) C. Reynoso, Maria G, , ,			Date of Disbursement MM / DD / YYYY 08 / 10 / 2021		
Mailing Address 12917 Kerrydale Rd			FEC Identification Number C [] Transaction ID : SB21B.29641		
City Woodbridge	State VA	Zip Code 22193	Amount of Each Disbursement this Period [] 2000.00		
Purpose of Disbursement Strategic Consulting		Candidate Name []	Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	[] 6000.00
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 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)
YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial) A. Reynoso, Maria G, , ,		Date of Disbursement MM / DD / YYYY 08 / 25 / 2021	
Mailing Address 12917 Kerrydale Rd		FEC Identification Number C [] Transaction ID : SB21B.29651 Amount of Each Disbursement this Period [] 2000.00	
City Woodbridge	State VA	Zip Code 22193	Category/ Type []
Purpose of Disbursement Strategic Consulting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. Reynoso, Maria G, , ,		Date of Disbursement MM / DD / YYYY 09 / 10 / 2021	
Mailing Address 12917 Kerrydale Rd		FEC Identification Number C [] Transaction ID : SB21B.29662 Amount of Each Disbursement this Period [] 2250.00	
City Woodbridge	State VA	Zip Code 22193	Category/ Type []
Purpose of Disbursement Strategic Consulting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. Reynoso, Maria G, , ,		Date of Disbursement MM / DD / YYYY 09 / 22 / 2021	
Mailing Address 12917 Kerrydale Rd		FEC Identification Number C [] Transaction ID : SB21B.29673 Amount of Each Disbursement this Period [] 2250.00	
City Woodbridge	State VA	Zip Code 22193	Category/ Type []
Purpose of Disbursement Strategic Consulting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 6500.00
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)

Grid for line numbers 21b-30b with checkboxes. 21b is checked.

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

Form A: Reynoso, Maria G, , , Disbursement details including date (10/12/2021), address, purpose (Strategic Consulting), and amount (2250.00).

Form B: Reynoso, Maria G, , , Disbursement details including date (10/27/2021), address, purpose (Strategic Consulting), and amount (2250.00).

Form C: Reynoso, Maria G, , , Disbursement details including date (11/10/2021), address, purpose (Strategic Consulting), and amount (2250.00).

SUBTOTAL of Disbursements This Page (optional) 6750.00
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 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)
YOUTH PROGRESSIVE ACTION CATALYST

A. Reynoso, Maria G, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 12917 Kerrydale Rd

City Woodbridge State VA Zip Code 22193

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 23 / 2021

FEC Identification Number: C

Transaction ID : SB21B.29740

Amount of Each Disbursement this Period: 2250.00

Memo Item

B. Reynoso, Maria G, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 12917 Kerrydale Rd

City Woodbridge State VA Zip Code 22193

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 09 / 2021

FEC Identification Number: C

Transaction ID : SB21B.29751

Amount of Each Disbursement this Period: 2250.00

Memo Item

C. Reynoso, Maria G, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 12917 Kerrydale Rd

City Woodbridge State VA Zip Code 22193

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 22 / 2021

FEC Identification Number: C

Transaction ID : SB21B.29761

Amount of Each Disbursement this Period: 2250.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 6750.00

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 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)

YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial)

A. Sandler, Reiff, Lamb, Rosenstein & Birkenstock, PC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		26		2021

Mailing Address 1090 Vermont Ave. NW
Suite 750

City Washington State DC Zip Code 20005

Purpose of Disbursement
Legal Services

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.29654
Amount of Each Disbursement this Period

[REDACTED] 1590.00

Memo Item

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Shopify

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		19		2021

Mailing Address 33 New Montgomery St.

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
Merchandise

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.29629
Amount of Each Disbursement this Period

[REDACTED] 30.74

Memo Item

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. Shopify

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		17		2021

Mailing Address 33 New Montgomery St.

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
Merchandise

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.29645
Amount of Each Disbursement this Period

[REDACTED] 30.74

Memo Item

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

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

[REDACTED] 1651.48

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

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial)

A. Shopify

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	5		2	0	2	1

Mailing Address 33 New Montgomery St.

FEC Identification Number

C

Transaction ID : SB21B.29665

Amount of Each Disbursement this Period

30.74

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
Merchandise

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Memo Item

Full Name (Last, First, Middle Initial)

B. Shopify

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	8		2	0	2	1

Mailing Address 33 New Montgomery St.

FEC Identification Number

C

Transaction ID : SB21B.29687

Amount of Each Disbursement this Period

30.74

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
Merchandise

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Memo Item

Full Name (Last, First, Middle Initial)

C. Shopify

Date of Disbursement

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

Mailing Address 33 New Montgomery St.

FEC Identification Number

C

Transaction ID : SB21B.2973c

Amount of Each Disbursement this Period

30.74

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
Merchandise

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Memo Item

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

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

92.22

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Shopify

Full Name (Last, First, Middle Initial)

Mailing Address 33 New Montgomery St.

City San Francisco State CA Zip Code 94105

Purpose of Disbursement Merchandise

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 14 / 2021

FEC Identification Number: C

Transaction ID : SB21B.29757

Amount of Each Disbursement this Period: 30.74

Memo Item

B. Shopify

Full Name (Last, First, Middle Initial)

Mailing Address 33 New Montgomery St.

City San Francisco State CA Zip Code 94105

Purpose of Disbursement Merchandise

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 31 / 2021

FEC Identification Number: C

Transaction ID : SB21B.29777

Amount of Each Disbursement this Period: 4.81

Memo Item

C. Siegel, Charlotte T., , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2501 Ocean Front Walk

City Los Angeles State CA Zip Code 90291

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 12 / 2021

FEC Identification Number: C

Transaction ID : SB21B.29728

Amount of Each Disbursement this Period: 300.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 335.55

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)

Form for line numbers 21b-30b with checkboxes. 21b is checked.

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

Form A: Stahr, Morgan, , , Date of Disbursement 07/23/2021, Mailing Address 515 S Poplar St, City Hazleton, PA, Zip Code 18201, Purpose of Disbursement Strategic Consulting, Candidate Name, Office Sought, Disbursement For: Primary, General, Other (specify), Category/Type, FEC Identification Number, Transaction ID: SB21B.29632, Amount of Each Disbursement this Period 5500.00, Memo Item.

Form B: Stahr, Morgan, , , Date of Disbursement 08/25/2021, Mailing Address 515 S Poplar St, City Hazleton, PA, Zip Code 18201, Purpose of Disbursement Strategic Consulting, Candidate Name, Office Sought, Disbursement For: Primary, General, Other (specify), Category/Type, FEC Identification Number, Transaction ID: SB21B.29650, Amount of Each Disbursement this Period 5500.00, Memo Item.

Form C: Stahr, Morgan, , , Date of Disbursement 09/22/2021, Mailing Address 515 S Poplar St, City Hazleton, PA, Zip Code 18201, Purpose of Disbursement Strategic Consulting, Candidate Name, Office Sought, Disbursement For: Primary, General, Other (specify), Category/Type, FEC Identification Number, Transaction ID: SB21B.29672, Amount of Each Disbursement this Period 5500.00, Memo Item.

SUBTOTAL of Disbursements This Page (optional) 16500.00
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 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)
YOUTH PROGRESSIVE ACTION CATALYST

A. Stahr, Morgan, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 515 S Poplar St

City Hazleton State PA Zip Code 18201

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 28 / 2021

FEC Identification Number: C

Transaction ID : SB21B.29701

Amount of Each Disbursement this Period: 5500.00

Memo Item

B. Stahr, Morgan, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 515 S Poplar St

City Hazleton State PA Zip Code 18201

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 23 / 2021

FEC Identification Number: C

Transaction ID : SB21B.29741

Amount of Each Disbursement this Period: 5500.00

Memo Item

C. Stahr, Morgan, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 515 S Poplar St

City Hazleton State PA Zip Code 18201

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 26 / 2021

FEC Identification Number: C

Transaction ID : SB21B.29743

Amount of Each Disbursement this Period: 498.12

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 11498.12

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial)

A. Stahr, Morgan, , ,

Mailing Address 515 S Poplar St

City
Hazleton

State
PA

Zip Code
18201

Purpose of Disbursement
Strategic Consulting

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			30			2021			

FEC Identification Number

C

Transaction ID : SB21B.29772

Amount of Each Disbursement this Period

5500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Summit Campaign Strategies Inc.

Mailing Address 87 Summit Circle

City
Shelburne

State
VT

Zip Code
05482

Purpose of Disbursement
Email Consulting

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
07			21			2021			

FEC Identification Number

C

Transaction ID : SB21B.29630

Amount of Each Disbursement this Period

6000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Summit Campaign Strategies Inc.

Mailing Address 87 Summit Circle

City
Shelburne

State
VT

Zip Code
05482

Purpose of Disbursement
Email Consulting

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
08			17			2021			

FEC Identification Number

C

Transaction ID : SB21B.29646

Amount of Each Disbursement this Period

6000.00

Memo Item

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

17500.00

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 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)
YOUTH PROGRESSIVE ACTION CATALYST

A. Summit Campaign Strategies Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 87 Summit Circle

City Shelburne State VT Zip Code 05482

Purpose of Disbursement Email Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 21 / 2021

FEC Identification Number: C

Transaction ID : SB21B.29671

Amount of Each Disbursement this Period: 6000.00

Memo Item

B. Summit Campaign Strategies Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 87 Summit Circle

City Shelburne State VT Zip Code 05482

Purpose of Disbursement Email Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 21 / 2021

FEC Identification Number: C

Transaction ID : SB21B.29690

Amount of Each Disbursement this Period: 6000.00

Memo Item

C. Summit Campaign Strategies Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 87 Summit Circle

City Shelburne State VT Zip Code 05482

Purpose of Disbursement Email Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 18 / 2021

FEC Identification Number: C

Transaction ID : SB21B.29737

Amount of Each Disbursement this Period: 6000.00

Memo Item

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

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

18000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial)

A. Summit Campaign Strategies Inc.

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			20			2021					

Mailing Address 87 Summit Circle

FEC Identification Number

C []
Transaction ID : SB21B.29760
 Amount of Each Disbursement this Period
 [] 6000.00

City Shelburne State VT Zip Code 05482

Purpose of Disbursement
Email Consulting

[]
Category/
Type

Candidate Name

Office Sought: House Senate President
 State: District:

Disbursement For: Primary General Other (specify) ▼

Memo Item

Full Name (Last, First, Middle Initial)

B. Unfiltered Media LLC

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
07			02			2021					

Mailing Address 2663 Manhattan Place #102

FEC Identification Number

C []
Transaction ID : SB21B.29621
 Amount of Each Disbursement this Period
 [] 1200.00

City Vienna State VA Zip Code 22180

Purpose of Disbursement
Digital Consulting Services

[]
Category/
Type

Candidate Name

Office Sought: House Senate President
 State: District:

Disbursement For: Primary General Other (specify) ▼

Memo Item

Full Name (Last, First, Middle Initial)

C. Unfiltered Media LLC

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
07			28			2021					

Mailing Address 2663 Manhattan Place #102

FEC Identification Number

C []
Transaction ID : SB21B.29636
 Amount of Each Disbursement this Period
 [] 1200.00

City Vienna State VA Zip Code 22180

Purpose of Disbursement
Digital Consulting Services

[]
Category/
Type

Candidate Name

Office Sought: House Senate President
 State: District:

Disbursement For: Primary General Other (specify) ▼

Memo Item

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

[] 8400.00

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 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)
YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial)

A. Unfiltered Media LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		02		2021

Mailing Address 2663 Manhattan Place
#102

City Vienna State VA Zip Code 22180

Purpose of Disbursement
Digital Consulting Services

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.29659
Amount of Each Disbursement this Period

[REDACTED] 1200.00

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

Full Name (Last, First, Middle Initial)

B. Unfiltered Media LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		01		2021

Mailing Address 2663 Manhattan Place
#102

City Vienna State VA Zip Code 22180

Purpose of Disbursement
Digital Consulting Services

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.29679
Amount of Each Disbursement this Period

[REDACTED] 1200.00

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

Full Name (Last, First, Middle Initial)

C. Unfiltered Media LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		02		2021

Mailing Address 2663 Manhattan Place
#102

City Vienna State VA Zip Code 22180

Purpose of Disbursement
Digital Consulting Services

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.29711
Amount of Each Disbursement this Period

[REDACTED] 1200.00

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

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

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

[REDACTED] 3600.00

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial)

A. Unfiltered Media LLC

Mailing Address 2663 Manhattan Place
#102

City Vienna State VA Zip Code 22180

Purpose of Disbursement
Digital Consulting Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 03 / 2021

FEC Identification Number

C
Transaction ID : SB21B.29748
Amount of Each Disbursement this Period
1200.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Zoom Inc.

Mailing Address 55 Almaden Boulevard
6th Floor

City San Jose State CA Zip Code 95113

Purpose of Disbursement
Software

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 02 / 2021

FEC Identification Number

C
Transaction ID : SB21B.29620
Amount of Each Disbursement this Period
53.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Zoom Inc.

Mailing Address 55 Almaden Boulevard
6th Floor

City San Jose State CA Zip Code 95113

Purpose of Disbursement
Software

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 02 / 2021

FEC Identification Number

C
Transaction ID : SB21B.29635
Amount of Each Disbursement this Period
53.00

Memo Item

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

1306.00

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 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)

YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial)

A. Zoom Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		01		2021

Mailing Address 55 Almaden Boulevard
6th Floor

FEC Identification Number

C []
Transaction ID : SB21B.29658
 Amount of Each Disbursement this Period
 [] 53.00

City San Jose State CA Zip Code 95113

Purpose of Disbursement
Software

[]
Category/
Type

Candidate Name

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

Memo Item

Full Name (Last, First, Middle Initial)

B. Zoom Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		04		2021

Mailing Address 55 Almaden Boulevard
6th Floor

FEC Identification Number

C []
Transaction ID : SB21B.29680
 Amount of Each Disbursement this Period
 [] 53.00

City San Jose State CA Zip Code 95113

Purpose of Disbursement
Software

[]
Category/
Type

Candidate Name

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

Memo Item

Full Name (Last, First, Middle Initial)

C. Zoom Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		01		2021

Mailing Address 55 Almaden Boulevard
6th Floor

FEC Identification Number

C []
Transaction ID : SB21B.29705
 Amount of Each Disbursement this Period
 [] 53.00

City San Jose State CA Zip Code 95113

Purpose of Disbursement
Software

[]
Category/
Type

Candidate Name

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

Memo Item

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

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

[] 159.00

[]

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Zoom Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 55 Almaden Boulevard
6th Floor

City San Jose State CA Zip Code 95113

Purpose of Disbursement Software

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
12 / 02 / 2021

FEC Identification Number: C

Transaction ID : SB21B.29747

Amount of Each Disbursement this Period: 53.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	53.00
TOTAL This Period (last page this line number only).....▶	143341.84

**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)
YOUTH PROGRESSIVE ACTION CATALYST

A. GRASSROOTS DEMOCRATS HQ

Full Name (Last, First, Middle Initial)

Mailing Address 249 E OCEAN BL #685

City LONG BEACH State CA Zip Code 90802

Purpose of Disbursement Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 27 / 2021

FEC Identification Number: C00707091
Transaction ID : SB23.29666

Amount of Each Disbursement this Period: 1000.00

Memo Item

B. GRASSROOTS DEMOCRATS HQ

Full Name (Last, First, Middle Initial)

Mailing Address 249 E OCEAN BL #685

City LONG BEACH State CA Zip Code 90802

Purpose of Disbursement Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 17 / 2021

FEC Identification Number: C00707091
Transaction ID : SB23.29667

Amount of Each Disbursement this Period: 1500.00

Memo Item

C. GRASSROOTS DEMOCRATS HQ

Full Name (Last, First, Middle Initial)

Mailing Address 249 E OCEAN BL #685

City LONG BEACH State CA Zip Code 90802

Purpose of Disbursement Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 02 / 2021

FEC Identification Number: C00707091
Transaction ID : SB23.29711

Amount of Each Disbursement this Period: 2160.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	4660.00
TOTAL This Period (last page this line number only).....▶	4660.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input 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)
YOUTH PROGRESSIVE ACTION CATALYST

A. Amalgamated Bank

Full Name (Last, First, Middle Initial)

Mailing Address 1825 K Street, N.W

City Washington State DC Zip Code 20006

Purpose of Disbursement
Bank Charges - IE Ony Account

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 29 / 2021

FEC Identification Number: C
Transaction ID : SB29.29610
Amount of Each Disbursement this Period: 10.00

Memo Item

B. Amalgamated Bank

Full Name (Last, First, Middle Initial)

Mailing Address 1825 K Street, N.W

City Washington State DC Zip Code 20006

Purpose of Disbursement
Bank Charges - IE Ony Account

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 26 / 2021

FEC Identification Number: C
Transaction ID : SB29.29613
Amount of Each Disbursement this Period: 10.00

Memo Item

C. Amalgamated Bank

Full Name (Last, First, Middle Initial)

Mailing Address 1825 K Street, N.W

City Washington State DC Zip Code 20006

Purpose of Disbursement
Bank Charges - IE Ony Account

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 27 / 2021

FEC Identification Number: C
Transaction ID : SB29.29619
Amount of Each Disbursement this Period: 10.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 30.00

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 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)
YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial) A. Google		Date of Disbursement MM / DD / YYYY 07 / 06 / 2021	
Mailing Address 1600 Amphitheatre Parkway		FEC Identification Number C [] Transaction ID : SB29.29600 Amount of Each Disbursement this Period [] 57.45	
City Mountain View State CA Zip Code 94043	Purpose of Disbursement Technology Fee - IE Only Account	Candidate Name	Category/Type []
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
Full Name (Last, First, Middle Initial) B. Google		Date of Disbursement MM / DD / YYYY 08 / 09 / 2021	
Mailing Address 1600 Amphitheatre Parkway		FEC Identification Number C [] Transaction ID : SB29.29603 Amount of Each Disbursement this Period [] 50.88	
City Mountain View State CA Zip Code 94043	Purpose of Disbursement Technology Fee - IE Only Account	Candidate Name	Category/Type []
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
Full Name (Last, First, Middle Initial) C. Google		Date of Disbursement MM / DD / YYYY 09 / 07 / 2021	
Mailing Address 1600 Amphitheatre Parkway		FEC Identification Number C [] Transaction ID : SB29.29605 Amount of Each Disbursement this Period [] 50.88	
City Mountain View State CA Zip Code 94043	Purpose of Disbursement Technology Fee - IE Only Account	Candidate Name	Category/Type []
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
SUBTOTAL of Disbursements This Page (optional)..... ▶		[] 159.21	
TOTAL This Period (last page this line number only)..... ▶		[]	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial) A. Google		Date of Disbursement MM / DD / YYYY 10 / 07 / 2021	
Mailing Address 1600 Amphitheatre Parkway		FEC Identification Number C [] Transaction ID : SB29.29609 Amount of Each Disbursement this Period [] 57.24	
City Mountain View	State CA	Zip Code 94043	Category/ Type <input type="checkbox"/> Memo Item
Purpose of Disbursement Technology Fee - IE Only Account		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
Full Name (Last, First, Middle Initial) B. Google		Date of Disbursement MM / DD / YYYY 11 / 05 / 2021	
Mailing Address 1600 Amphitheatre Parkway		FEC Identification Number C [] Transaction ID : SB29.29611 Amount of Each Disbursement this Period [] 57.24	
City Mountain View	State CA	Zip Code 94043	Category/ Type <input type="checkbox"/> Memo Item
Purpose of Disbursement Technology Fee - IE Only Account		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
Full Name (Last, First, Middle Initial) C. Google		Date of Disbursement MM / DD / YYYY 12 / 06 / 2021	
Mailing Address 1600 Amphitheatre Parkway		FEC Identification Number C [] Transaction ID : SB29.29614 Amount of Each Disbursement this Period [] 57.24	
City Mountain View	State CA	Zip Code 94043	Category/ Type <input type="checkbox"/> Memo Item
Purpose of Disbursement Technology Fee - IE Only Account		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
SUBTOTAL of Disbursements This Page (optional)..... ▶		[] 171.72	
TOTAL This Period (last page this line number only)..... ▶		[]	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial)

A. Guthman, Nick, , ,

Mailing Address 10913 Lindblade St.

City
Culver City

State
CA

Zip Code
90230

Purpose of Disbursement
Strategic Consulting - IE Only Account

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C []

Transaction ID : SB29.29602

Amount of Each Disbursement this Period

[] 2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Un-PAC

Mailing Address 9 Kern Ramble St

City
Austin

State
TX

Zip Code
78722

Purpose of Disbursement
Donation - IE Ony Account

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	2		2	1		2	0	2	1		

FEC Identification Number

C []

Transaction ID : SB29.29617

Amount of Each Disbursement this Period

[] 250.00

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

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)..... ▶

[] 2250.00

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

[] 2610.93