

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

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

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00381806 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) 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 09 / 01 / 2017 through 09 / 30 / 2017

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

Signature of Treasurer Lennon, Karen, , , [Electronically Filed] Date 10 / 04 / 2017

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

PROGRESSIVE CHOICES PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2017"/>		<input type="text" value="24903.30"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="38370.45"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="10500.00"/>	<input type="text" value="52000.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="48870.45"/>	<input type="text" value="76903.30"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="12348.12"/>	<input type="text" value="40380.97"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="36522.33"/>	<input type="text" value="36522.33"/>
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

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

PROGRESSIVE CHOICES PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees		
(i) Itemized (use Schedule A).....	5000.00	32000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	5000.00	32000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	5500.00	20000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	10500.00	52000.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	10500.00	52000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	10500.00	52000.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	348.12	3380.97
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	348.12	3380.97
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	11000.00	36000.00
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).....	1000.00	1000.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	12348.12	40380.97
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	12348.12	40380.97

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	10500.00	52000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10500.00	52000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	348.12	3380.97
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	348.12	3380.97

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

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

FOR LINE NUMBER: PAGE 6 OF 13
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

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

Mailing Address 5737 S. Blackstone Avenue

City Chicago State IL Zip Code 60637

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

Name of Employer (for Individual) Constructure Aggregates Corporation Occupation (for Individual) Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 06 / 2017

Transaction ID : SA11AI.4234

Amount of Each Receipt this Period
5000.00

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 / 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 / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 13
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

A. AFSCME PEOPLE

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

Mailing Address 1625 L Street NW

City Washington	State DC	Zip Code 20036
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00011114

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2017

Transaction ID : SA11C.4238

Amount of Each Receipt this Period
2500.00

Memo Item

B. American Optometric Association PAC

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

Mailing Address 1505 Prince Street, #300

City Alexendria	State VA	Zip Code 22314
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FEC ID number of contributing federal political committee. **C** C00024968

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

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
09	/	27	/	2017

Transaction ID : SA11C.4236

Amount of Each Receipt this Period
2000.00

Memo Item

c. The American Congress of OB-GYNs PAC (OB-GYN PAC)

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

Mailing Address P.O. Box 96920

City Washington	State DC	Zip Code 20090
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00364158

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

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
09	/	27	/	2017

Transaction ID : SA11C.4240

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	5500.00
TOTAL This Period (last page this line number only).....	5500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

Full Name (Last, First, Middle Initial)

A. AT&T

Mailing Address 208 Akard Street

City Dallas State TX Zip Code 75202

Purpose of Disbursement
Telephone and Internet

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
09 / 06 / 2017

FEC Identification Number

C
Transaction ID : SB21B.4197
Amount of Each Disbursement this Period
48.12

Memo Item

Full Name (Last, First, Middle Initial)

B. Broadway 5533 LLC

Mailing Address 1025 W. Sunnyside Avenue

City Chicago State IL Zip Code 60640

Purpose of Disbursement
Office Rent

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
09 / 06 / 2017

FEC Identification Number

C
Transaction ID : SB21B.4198
Amount of Each Disbursement this Period
300.00

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
State: District:

Disbursement For: Primary General Other (specify) ▼

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)..... ▶

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

348.12
348.12

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

A. BRENDAN KELLY FOR SOUTHERN ILLINOIS

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

City BELLEVILLE State IL Zip Code 62222

Purpose of Disbursement Contribution

Candidate Name KELLY, BRENDAN, , ,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: IL District: 12

Date of Disbursement: 09 / 18 / 2017

FEC Identification Number: C00649558
Transaction ID : SB23.4220
Amount of Each Disbursement this Period: 1000.00

Memo Item

B. BRINDISI FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 165

City UTICA State NY Zip Code 13503

Purpose of Disbursement Contribution

Candidate Name BRINDISI, ANTHONY, , ,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: NY District: 22

Date of Disbursement: 09 / 18 / 2017

FEC Identification Number: C00648725
Transaction ID : SB23.4211
Amount of Each Disbursement this Period: 1000.00

Memo Item

C. CHRISSY HOULAN FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 222

City DEVON State PA Zip Code 19333

Purpose of Disbursement Contribution

Candidate Name HOULAHAN, CHRISSY, , ,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: PA District: 06

Date of Disbursement: 09 / 18 / 2017

FEC Identification Number: C00637371
Transaction ID : SB23.4214
Amount of Each Disbursement this Period: 1000.00

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

Full Name (Last, First, Middle Initial)

A. FINKENAUER FOR CONGRESS

Mailing Address P.O. BOX 598

City
DUBUQUE

State
IA

Zip Code
52004

Purpose of Disbursement
Contribution

Candidate Name

FINKENAUER, ABBY, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: **IA** District: **01**

Date of Disbursement

/ /

FEC Identification Number

C

Transaction ID : SB23.4228

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. GRETCHEN DRISKELL FOR CONGRESS

Mailing Address PO BOX 464

City
SALINE

State
MI

Zip Code
48176

Purpose of Disbursement
Contribution

Candidate Name

DRISKELL, GRETCHEN, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: **MI** District: **07**

Date of Disbursement

/ /

FEC Identification Number

C

Transaction ID : SB23.4208

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. JASON CROW FOR CONGRESS

Mailing Address PO BOX 32145

City
AURORA

State
CO

Zip Code
80041

Purpose of Disbursement
Contribution

Candidate Name

CROW, JASON, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: **CO** District: **06**

Date of Disbursement

/ /

FEC Identification Number

C

Transaction ID : SB23.4217

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

Full Name (Last, First, Middle Initial)
A. NOLAN FOR CONGRESS VOLUNTEER COMMITTEE

Date of Disbursement: MM / DD / YYYY
09 / 18 / 2017

Mailing Address: PO BOX 1041

City: BRAINERD State: MN Zip Code: 56401

Purpose of Disbursement: Contribution

Candidate Name: NOLAN, RICHARD M., , ,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: MN District: 08

FEC Identification Number: C00499053
Transaction ID : SB23.4206
Amount of Each Disbursement this Period: 1000.00

Memo Item

Full Name (Last, First, Middle Initial)
B. RUBEN KIHUEN FOR CONGRESS

Date of Disbursement: MM / DD / YYYY
09 / 18 / 2017

Mailing Address: P.O. BOX 458

City: LAS VEGAS State: NV Zip Code: 89125

Purpose of Disbursement: Contribution

Candidate Name: KIHUEN, RUBEN, , ,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: NV District: 04

FEC Identification Number: C00502773
Transaction ID : SB23.4200
Amount of Each Disbursement this Period: 1000.00

Memo Item

Full Name (Last, First, Middle Initial)
C. STEPHANIE MURPHY FOR CONGRESS

Date of Disbursement: MM / DD / YYYY
09 / 18 / 2017

Mailing Address: PO BOX 205

City: WINTER PARK State: FL Zip Code: 32790

Purpose of Disbursement: Contribution

Candidate Name: MURPHY, STEPHANIE, , ,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: FL District: 07

FEC Identification Number: C00620443
Transaction ID : SB23.4205
Amount of Each Disbursement this Period: 1000.00

Memo Item

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

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

A. SUSIE LEE FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address 5130 S FORT APACHE RD
STE. 215-382

City LAS VEGAS State NV Zip Code 89148

Purpose of Disbursement Contribution

Candidate Name
LEE, SUSIE, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: NV District: 03

Date of Disbursement: 09 / 19 / 2017

FEC Identification Number: **C00655613**
Transaction ID : **SB23.4225**
Amount of Each Disbursement this Period: 1000.00

Memo Item

B. TOM O'HALLERAN FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address 2910 E GARY WAY

City PHOENIX State AZ Zip Code 85042

Purpose of Disbursement Contribution

Candidate Name
O'HALLERAN, TOM, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: AZ District: 01

Date of Disbursement: 09 / 18 / 2017

FEC Identification Number: **C00582890**
Transaction ID : **SB23.4207**
Amount of Each Disbursement this Period: 1000.00

Memo Item

C.

Full Name (Last, First, Middle Initial)
Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

State: District:

Date of Disbursement: / /

FEC Identification Number: **C**

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	2000.00
TOTAL This Period (last page this line number only).....▶	11000.00

**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)
PROGRESSIVE CHOICES PAC

A. Friends of Alyx Pattison

Full Name (Last, First, Middle Initial)

Mailing Address 53 W. Jackson Blvd. #510

City Chicago State IL Zip Code 60604

Purpose of Disbursement Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 25 / 2017

FEC Identification Number: C

Transaction ID : SB29.4231

Amount of Each Disbursement this Period: 1000.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

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