

**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

Indivisible Action

ADDRESS (number and street)

PO Box 43135

Check if different  
than previously  
reported. (ACC)

Washington

DC

20010

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C

C00678839

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)  
(Non-Election  
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)  
(Non-Election  
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

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

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

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

General (30G)



Runoff (30R)



Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

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

Ramey, Elizabeth, , ,

Signature of Treasurer

Ramey, Elizabeth, , ,

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

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

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Indivisible Action

Report Covering the Period:

From:

MM / DD / YYYY  
05 / 01 / 2025

To:

MM / DD / YYYY  
05 / 31 / 2025

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2025		1560866.88
(b) Cash on Hand at Beginning of Reporting Period.....	1919208.65	
(c) Total Receipts (from Line 19) .....	188004.62	1676749.42
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	2107213.27	3237616.30
7. Total Disbursements (from Line 31) .....	80386.43	1210789.46
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	2026826.84	2026826.84
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	



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

**For further information, contact the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov)**

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Indivisible Action

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y  
05 01 2025

To:

M M / D D / Y Y Y Y Y  
05 31 2025**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).....

1918.00

3306.00

(ii) Unitemized .....

4249.00

24435.04

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

6167.00

27741.04

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

6167.00

27741.04

## 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.).....

181837.62

1649008.38

## 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)) .....

188004.62

1676749.42

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

188004.62

1676749.42

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	244.77	1087.10
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	244.77	1087.10
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	10000.00
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).....	80141.66	1199702.36
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)) ..	80386.43	1210789.46
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	80386.43	1210789.46

**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) .....	6167.00	27741.04
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	6167.00	27741.04
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....▶	244.77	1087.10
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	244.77	1087.10

**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 235

(check only one)

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

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

NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Anderson, Vanessa, , ,**

Mailing Address 9613 Fannin Sta E

City  
HoustonState  
TXZip Code  
77045-4654FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Chevron CorporationOccupation (for Individual)  
Internal Auditor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 28 / 2025

Transaction ID : 30260788

Amount of Each Receipt this Period

50.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

**B. ActBlue**

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6167.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 28 / 2025

Transaction ID : 30260788E

Amount of Each Receipt this Period

50.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

**C. Bermingham, Ann, , ,**

Mailing Address 1135 Oriole Rd

City

Santa Barbara

State

CA

Zip Code

93108-2438

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 16 / 2025

Transaction ID : 30260641

Amount of Each Receipt this Period

63.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

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

113.00

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

FOR LINE NUMBER: PAGE 7 OF 235

(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)

Indivisible Action

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

**A. ActBlue**

Mailing Address PO Box 441146

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

C

Name of Employer (for Individual)

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6167.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 16 / 2025

Transaction ID : 30260641E

Amount of Each Receipt this Period

63.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

**B. Dodge, Lowell, , ,**

Mailing Address 6900 Rozena Dr

City  
LongmontState  
COZip Code  
80503-7308FEC 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  
05 / 15 / 2025

Transaction ID : 30260637

Amount of Each Receipt this Period

100.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

**C. ActBlue**

Mailing Address PO Box 441146

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

C

Name of Employer (for Individual)

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

6167.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 15 / 2025

Transaction ID : 30260637E

Amount of Each Receipt this Period

100.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

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

100.00

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

FOR LINE NUMBER: PAGE 8 OF 235

(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)

Indivisible Action

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

**A.** Fried, Rona, , ,

Mailing Address 231 W Pulaski Rd

City  
Huntington StationState  
NYZip Code  
11746-1535FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SustainableBusiness.comOccupation (for Individual)  
Internet Media

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  
05 / 27 / 2025

Transaction ID : 30260771

Amount of Each Receipt this Period

50.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

**B.** ActBlue

Mailing Address PO Box 441146

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

C

Name of Employer (for Individual)

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6167.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 27 / 2025

Transaction ID : 30260771E

Amount of Each Receipt this Period

50.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

**C.** gregurich, don, , ,

Mailing Address 1806 Tarragon Dr

City  
MadisonState  
WIZip Code  
53716-2300FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employedOccupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 16 / 2025

Transaction ID : 30260651

Amount of Each Receipt this Period

500.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

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

550.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 9 OF 235  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. ActBlue**

Mailing Address PO Box 441146

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

C

Name of Employer (for Individual)

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6167.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 16 / 2025

Transaction ID : 30260651E

Amount of Each Receipt this Period

500.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

**B. Hansen, Mike, , ,**

Mailing Address 874 Swan Ln

City  
DeerfieldState  
ILZip Code  
60015-3671FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
n/aOccupation (for Individual)  
Freelance Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 16 / 2025

Transaction ID : 30260645

Amount of Each Receipt this Period

100.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

**C. ActBlue**

Mailing Address PO Box 441146

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

C

Name of Employer (for Individual)

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

6167.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 16 / 2025

Transaction ID : 30260645E

Amount of Each Receipt this Period

100.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

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

100.00

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

FOR LINE NUMBER: PAGE 10 OF 235

(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)

Indivisible Action

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

**A. Harding, Carol, , ,**

Mailing Address 2519 Wildlife Run

City  
LutzState  
FLZip Code  
33559-7348FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
noneOccupation (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  
05 / 29 / 2025

Transaction ID : 30260791

Amount of Each Receipt this Period

50.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

**B. ActBlue**

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6167.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 29 / 2025

Transaction ID : 30260791E

Amount of Each Receipt this Period

50.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

**C. Horwitz, Chris, , ,**

Mailing Address 2200 Beechwood Blvd

City

Pittsburgh

State

PA

Zip Code

15217-1816

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
electrogripOccupation (for Individual)  
ceo

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  
05 / 03 / 2025

Transaction ID : 30260505

Amount of Each Receipt this Period

50.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

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

100.00

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

FOR LINE NUMBER: PAGE 11 OF 235

(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)

Indivisible Action

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

**A. ActBlue**

Mailing Address PO Box 441146

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

C

Name of Employer (for Individual)

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6167.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 03 / 2025

Transaction ID : 30260505E

Amount of Each Receipt this Period

50.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

**B. limoncelli, thomas, , ,**

Mailing Address 302 Belleville Ave

City  
BloomfieldState  
NJZip Code  
07003-3651FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Stack Exchange IncOccupation (for Individual)  
Computer System Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 19 / 2025

Transaction ID : 30260679

Amount of Each Receipt this Period

60.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

**C. ActBlue**

Mailing Address PO Box 441146

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

C

Name of Employer (for Individual)

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

6167.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 19 / 2025

Transaction ID : 30260679E

Amount of Each Receipt this Period

60.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

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

60.00

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

FOR LINE NUMBER: PAGE 12 OF 235

(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)

Indivisible Action

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

**A. Mayer, Susan, , ,**

Mailing Address 20 Sawyer Rd

City  
LeeState  
NHZip Code  
03861-6433FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 26 / 2025

Transaction ID : 30260757

Amount of Each Receipt this Period

50.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

**B. ActBlue**

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6167.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 26 / 2025

Transaction ID : 30260757E

Amount of Each Receipt this Period

50.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

**C. Millea, Mike, , ,**Mailing Address 830 S Pacific Coast Hwy  
Ste 200

City

El Segundo

State

CA

Zip Code

90245

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Keller WilliamsOccupation (for Individual)  
Real estate broker

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  
05 / 14 / 2025

Transaction ID : 30260633

Amount of Each Receipt this Period

50.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

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

100.00

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

FOR LINE NUMBER: PAGE 13 OF 235

(check only one)

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

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

NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. ActBlue**

Mailing Address PO Box 441146

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

C

Name of Employer (for Individual)

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6167.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 14 / 2025

Transaction ID : 30260633E

Amount of Each Receipt this Period

50.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

**B. Mullinax, R Steven, , ,**

Mailing Address 4648 SW 39th Dr

City  
PortlandState  
ORZip Code  
97221-3923FEC 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 / D D / Y Y Y Y Y Y  
05 / 31 / 2025

Transaction ID : 30260831

Amount of Each Receipt this Period

50.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

**C. ActBlue**

Mailing Address PO Box 441146

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

C

Name of Employer (for Individual)

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

6167.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 31 / 2025

Transaction ID : 30260831E

Amount of Each Receipt this Period

50.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

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

50.00

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

FOR LINE NUMBER: PAGE 14 OF 235

(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)

Indivisible Action

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

**A. Natowitz, Joseph, , ,**

Mailing Address 709 Honeysuckle Ln

City  
College StationState  
TXZip Code  
77845-7915FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 01 / 2025

Transaction ID : 30260497

Amount of Each Receipt this Period

300.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

**B. ActBlue**

Mailing Address PO Box 441146

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

C

Name of Employer (for Individual)

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6167.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 01 / 2025

Transaction ID : 30260497E

Amount of Each Receipt this Period

300.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

**C. Rech, Carolyn, , ,**

Mailing Address 8856 Blue Mountain Dr

City  
GoldenState  
COZip Code  
80403-8313FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 05 / 2025

Transaction ID : 30260519

Amount of Each Receipt this Period

50.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

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

350.00

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

FOR LINE NUMBER: PAGE 15 OF 235

(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)

Indivisible Action

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

**A. ActBlue**

Mailing Address PO Box 441146

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

C

Name of Employer (for Individual)

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6167.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 05 / 2025

Transaction ID : 30260519E

Amount of Each Receipt this Period

50.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

**B. Shaker, Douglas, , ,**

Mailing Address 1304 College Ave

City  
Palo AltoState  
CAZip Code  
94306-1222FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 26 / 2025

Transaction ID : 30260766E

Amount of Each Receipt this Period

50.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

**C. ActBlue**

Mailing Address PO Box 441146

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

C

Name of Employer (for Individual)

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

6167.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 26 / 2025

Transaction ID : 30260766E

Amount of Each Receipt this Period

50.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

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

50.00

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

FOR LINE NUMBER: PAGE 16 OF 235

(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)

Indivisible Action

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

**A. Stromsness, Rune, , ,**Mailing Address 222 Broadway  
Apt 1108City  
OaklandState  
CAZip Code  
94607-3845FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
University of CaliforniaOccupation (for Individual)  
IT Manager

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  
05 / 03 / 2025

Transaction ID : 30260508

Amount of Each Receipt this Period

175.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

**B. ActBlue**

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6167.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 03 / 2025

Transaction ID : 30260508E

Amount of Each Receipt this Period

175.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

**C. Wittwer, Jonathan, , ,**

Mailing Address 1927 Smith Grade

City

Santa Cruz

State

CA

Zip Code

95060-9758

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Wittwer & Parkin LLPOccupation (for Individual)  
Attorney

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  
05 / 10 / 2025

Transaction ID : 30260576

Amount of Each Receipt this Period

70.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

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

245.00



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

FOR LINE NUMBER: PAGE 17 OF 235

(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)

Indivisible Action

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

**A. ActBlue**

Mailing Address PO Box 441146

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

C

Name of Employer (for Individual)

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6167.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 10 / 2025

Transaction ID : 30260576E

Amount of Each Receipt this Period

70.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

**B. Wodhams, David, , ,**

Mailing Address 16612 Weeping Willow Dr

City  
RiversideState  
CAZip Code  
92503-9767FEC 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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 15 / 2025

Transaction ID : 30260639

Amount of Each Receipt this Period

100.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

**C. ActBlue**

Mailing Address PO Box 441146

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

C

Name of Employer (for Individual)

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

6167.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 15 / 2025

Transaction ID : 30260639E

Amount of Each Receipt this Period

100.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

100.00

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

1918.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 18 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A.** Abel, John, , ,

Mailing Address 1001 Taughannock Blvd

City  
IthacaState  
NYZip Code  
14850-9572FEC 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 ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 01 / 2025

Transaction ID : 30268673

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B.** Abraham, Adam, , ,

Mailing Address 936 Madison St

City  
DenverState  
COZip Code  
80206-4052FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

University of Colorado

Occupation (for Individual)

Physician

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  
05 / 10 / 2025

Transaction ID : 30263254

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C.** Acock, Mary, , ,

Mailing Address PO Box 537

City  
Six MileState  
SCZip Code  
29682-0537FEC 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 ▼

255.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 19 / 2025

Transaction ID : 30267094

Amount of Each Receipt this Period

51.00

☐ Memo Item

Non-Contribution Account

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

151.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 19 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Adams Chatham, Mary, , ,**

Mailing Address 2 Hudson Ave

City  
HudsonState  
NYZip Code  
12534-2808FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 15 / 2025

Transaction ID : 30266687

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**B. Addy, Thomas, , ,**

Mailing Address 1123 Bluff Pass S

City  
ChaskaState  
MNZip Code  
55318-9722FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 08 / 2025

Transaction ID : 30265528

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**C. Adler, Jerome, , ,**

Mailing Address 134 6th Ave

City  
BrooklynState  
NYZip Code  
11217-3518FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 22 / 2025

Transaction ID : 30267397

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

375.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 20 OF 235  
(check only one)

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

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)

Indivisible Action

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

**A. Amador, Robert, , ,**Mailing Address 21250 Hawthorne Blvd  
Ste 700City  
TorranceState  
CAZip Code  
90503-5514FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Amador Law CorporationOccupation (for Individual)  
Arbitrator Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 13 / 2025

Transaction ID : 30263265

Amount of Each Receipt this Period

26.00

☐ Memo Item

Non-Contribution Account

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

**B. Anderson, Carol, , ,**

Mailing Address 2418 Boulder Rd SE

City  
AtlantaState  
GAZip Code  
30316-3673FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Emory UniversityOccupation (for Individual)  
Professor

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  
05 / 07 / 2025

Transaction ID : 30263777

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C. Anderson, Kenneth, , ,**

Mailing Address 6244 Simmons Dr

City  
BoulderState  
COZip Code  
80303-3035FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
University of ColoradoOccupation (for Individual)  
Associate Professor

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  
05 / 07 / 2025

Transaction ID : 30263246

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

176.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 21 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Andrade, Rika, , ,**

Mailing Address 22855 Woodroe Ave

City  
HaywardState  
CAZip Code  
94541-3416FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 12 / 2025

Transaction ID : 30266057

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**B. Andrews, Dianne, , ,**

Mailing Address 5345 Sandra Way

City  
LivermoreState  
CAZip Code  
94550-3810FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 19 / 2025

Transaction ID : 30267107

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C. Andrews, Dianne, , ,**

Mailing Address 5345 Sandra Way

City  
LivermoreState  
CAZip Code  
94550-3810FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 20 / 2025

Transaction ID : 30267140

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

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

200.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 22 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A.** angus, kate, , ,

Mailing Address 18177 N Shore Estates Rd

City  
Spring LakeState  
MIZip Code  
49456-9116FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

LIM College

Occupation (for Individual)

teacher

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  
05 / 08 / 2025

Transaction ID : 30268333

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**B.** Applebey, Kerenda, , ,

Mailing Address 52783 Ackley Ter

City  
Paw PawState  
MIZip Code  
49079-9599FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Berrien RESA

Occupation (for Individual)

Director of Early Childhood Education

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  
05 / 27 / 2025

Transaction ID : 30267930

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C.** Arnold, Georgianne, , ,

Mailing Address 121 W Hutchinson Ave

City  
PittsburghState  
PAZip Code  
15218-1321FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Upmc

Occupation (for Individual)

Geneticist

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  
05 / 03 / 2025

Transaction ID : 30269114

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

175.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 23 OF 235  
(check only one)

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

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)

Indivisible Action

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

**A.** Arnold, Meg, , ,

Mailing Address 2605 Sloan St

City  
DavisState  
CAZip Code  
95618-7611FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GSD ConsultingOccupation (for Individual)  
Founder

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 07 / 2025

Transaction ID : 30263977

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**B.** Avey, Melinda, Lou, ,

Mailing Address 17 Meadow Run

City  
Round RockState  
TXZip Code  
78664-9618FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 01 / 2025

Transaction ID : 30264325

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C.** Bader, Douglas, , ,

Mailing Address 581 Bristolwood Ln

City  
Castle PinesState  
COZip Code  
80108-7906FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 07 / 2025

Transaction ID : 30265212

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

250.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 24 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Bartlett, Susan, , ,**

Mailing Address 553 Walnut St

City  
NewtonState  
MAZip Code  
02460-2408FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employedOccupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 07 / 2025

Transaction ID : 30265111

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B. Bartlett, Susan, , ,**

Mailing Address 553 Walnut St

City  
NewtonState  
MAZip Code  
02460-2408FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employedOccupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 09 / 2025

Transaction ID : 30265647

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C. Bayer, Debra, , ,**

Mailing Address 23782 NE Greens Crossing Rd

City  
RedmondState  
WAZip Code  
98053-5617FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
selfOccupation (for Individual)  
therapist

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  
05 / 13 / 2025

Transaction ID : 30269470

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

200.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 25 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A.** beatty, sharon, , ,

Mailing Address 15391 Beacon Point Dr

City  
NorthportState  
ALZip Code  
35475-3911FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 14 / 2025

Transaction ID : 30266499

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B.** Beatty, Will, , ,Mailing Address 2120 Southwest Expy  
Apt 19City  
San JoseState  
CAZip Code  
95126-4662FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RetiredOccupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 07 / 2025

Transaction ID : 30268710

Amount of Each Receipt this Period

200.00

☐ Memo Item

Non-Contribution Account

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

**C.** Becker, Dan, , ,

Mailing Address 306 NW 78th St

City  
SeattleState  
WAZip Code  
98117-4013FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 10 / 2025

Transaction ID : 30265845

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

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

350.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 26 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Behringer, Carol, , ,**

Mailing Address 2020 Lakeside Dr

City  
LouisvilleState  
KYZip Code  
40205-2129FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

314.92

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 16 / 2025

Transaction ID : 30271025

Amount of Each Receipt this Period

114.92

☐ Memo Item

Non-Contribution Account

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

**B. Bender, Ellen, , ,**Mailing Address 1349 Lexington Ave  
Apt 5CCity  
New YorkState  
NYZip Code  
10128-1580FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 01 / 2025

Transaction ID : 30270751

Amount of Each Receipt this Period

36.94

☐ Memo Item

Non-Contribution Account

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

**C. Berggren, Sonja, , ,**

Mailing Address 5925 E The Toledo

City  
Long BeachState  
CAZip Code  
90803-4142FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Panndora ProductionsOccupation (for Individual)  
producer/director/actor

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  
05 / 07 / 2025

Transaction ID : 30263393

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

201.86

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 27 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Bergman-Hill, David, , ,**

Mailing Address 999 Do Not Mail

City  
Castro ValleyState  
CAZip Code  
94552FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 28 / 2025

Transaction ID : 30267944

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B. Bernstein, Nina, , ,**

Mailing Address 450 Riverside Dr

City  
New YorkState  
NYZip Code  
10027-6820FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 30 / 2025

Transaction ID : 30268227

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**C. Berosini, Fonda, , ,**

Mailing Address 6737 Whitley Ter

City  
Los AngelesState  
CAZip Code  
90068-3222FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DisneyOccupation (for Individual)  
Communication

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  
05 / 01 / 2025

Transaction ID : 30268868

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

125.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 28 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Berosini, Fonda, , ,**

Mailing Address 6737 Whitley Ter

City  
Los AngelesState  
CAZip Code  
90068-3222FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DisneyOccupation (for Individual)  
Communication

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  
05 / 02 / 2025

Transaction ID : 30268414

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**B. Berti, Marilyn, , ,**

Mailing Address 155 SW 88th Ave

City  
PortlandState  
ORZip Code  
97225-6454FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 28 / 2025

Transaction ID : 30267949

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C. bible, cheryl, , ,**

Mailing Address 401 Great Elm Way

City  
ActonState  
MAZip Code  
01718-1023FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
VA HospitalOccupation (for Individual)  
Mental Health Counselor

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  
05 / 04 / 2025

Transaction ID : 30268322

Amount of Each Receipt this Period

37.00

☐ Memo Item

Non-Contribution Account

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

112.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 29 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Bigham, Lucy, , ,**

Mailing Address 624 Cooledge Ave NE

City  
AtlantaState  
GAZip Code  
30306-3636FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 17 / 2025

Transaction ID : 30266858

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**B. Blank, Paul, , ,**

Mailing Address PO Box 4335

City  
ArcataState  
CAZip Code  
95518-4335FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 07 / 2025

Transaction ID : 30265342

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**C. Bleeker, Nancy, , ,**Mailing Address 7929 Westpark Dr  
Apt 2317City  
McleanState  
VAZip Code  
22102-4441FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employedOccupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 01 / 2025

Transaction ID : 30264335

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

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

250.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 30 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Bloom, Nancy, , ,**Mailing Address 111 Perkins St  
Apt 227City  
Jamaica PlainState  
MAZip Code  
02130-4341FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employedOccupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 15 / 2025

Transaction ID : 30266650

Amount of Each Receipt this Period

36.00

☐ Memo Item

Non-Contribution Account

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

**B. Board, Dorothea, , ,**Mailing Address 1130 University Blvd  
Ste Pm B9City  
TuscaloosaState  
ALZip Code  
35401-0328FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DCH Health SystemsOccupation (for Individual)  
Project manager

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  
05 / 01 / 2025

Transaction ID : 30263571

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C. bonan, elizabeth, , ,**Mailing Address 120 E 81st St  
Apt 12ACity  
New YorkState  
NYZip Code  
10028-1422FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 04 / 2025

Transaction ID : 30264590

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

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

186.00

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

PAGE 31 OF 235

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Borcover, Philip, , ,**

Mailing Address 223 Douglass St

City

San Francisco

State

CA

Zip Code

94114-2424

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

SFUSD

Occupation (for Individual)

Teacher

Receipt For:

☐  
☐

Primary

☐ General

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
05 / 10 / 2025

Transaction ID : 30268994

Amount of Each Receipt this Period

50.00

☐

Memo Item

Non-Contribution Account

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

**B. Boyer, David, , ,**

Mailing Address 200 Lake Blvd S

City

Buffalo

State

MN

Zip Code

55313-1440

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

MM / DD / YYYY  
05 / 17 / 2025

Transaction ID : 30266921

Amount of Each Receipt this Period

75.00

☐

Memo Item

Non-Contribution Account

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

**C. Brace, Mary, , ,**

Mailing Address 7036 Cascade Rd SE

City

Grand Rapids

State

MI

Zip Code

49546-7305

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

MM / DD / YYYY  
05 / 11 / 2025

Transaction ID : 30265971

Amount of Each Receipt this Period

50.00

☐

Memo Item

Non-Contribution Account

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

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

175.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 32 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. BRADBURY, MARGARET, , ,**

Mailing Address 54 Maplewood St

City  
LarchmontState  
NYZip Code  
10538-1633FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AlterityOccupation (for Individual)  
Scientist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 21 / 2025

Transaction ID : 30268654

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

**B. Bradford, Nita, , ,**

Mailing Address 1890 Darlee Ct

City  
LakewoodState  
COZip Code  
80215-2956FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 30 / 2025

Transaction ID : 30268247

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C. Brault, Laurell, , ,**

Mailing Address 832 River Rd

City  
NorwoodState  
NYZip Code  
13668-3155FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 24 / 2025

Transaction ID : 30267658

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

350.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 33 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Brennan, Catherine, , ,**

Mailing Address 2306 Shenandoah Pl

City  
DavisState  
CAZip Code  
95616-6602FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SelfOccupation (for Individual)  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

293.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 31 / 2025

Transaction ID : 30271049

Amount of Each Receipt this Period

293.64

☐ Memo Item

Non-Contribution Account

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

**B. Breslin, Paul, , ,**Mailing Address 1635 Hinman Ave  
Apt 1City  
EvanstonState  
ILZip Code  
60201-6043FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 16 / 2025

Transaction ID : 30266822

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C. Bronfman, Adam, , ,**

Mailing Address 2750 Verde Valley School Rd

City  
SedonaState  
AZZip Code  
86351-9509FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Mighty Bum LLCOccupation (for Individual)  
consultant

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  
05 / 20 / 2025

Transaction ID : 30264030

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

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

843.64

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

PAGE 34 OF 235

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A.** brooks, shari, , ,

Mailing Address 1232 Springwood Way

City  
PacificaState  
CAZip Code  
94044-4016FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
google llcOccupation (for Individual)  
release engineer

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  
05 / 02 / 2025

Transaction ID : 30268415

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B.** Broten, Cynthia, , ,

Mailing Address 130 E Center Ave

City  
Lake BluffState  
ILZip Code  
60044-2502FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
selfOccupation (for Individual)  
artist

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  
05 / 16 / 2025

Transaction ID : 30269638

Amount of Each Receipt this Period

60.00

☐ Memo Item

Non-Contribution Account

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

**C.** Brown, Hamilton, , ,

Mailing Address PO Box 399

City  
Arroyo SecoState  
NMZip Code  
87514-0399FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
noneOccupation (for Individual)  
none

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 01 / 2025

Transaction ID : 30269057

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

160.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 35 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Brown, Hamilton, , ,**

Mailing Address PO Box 399

City  
Arroyo SecoState  
NMZip Code  
87514-0399FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
noneOccupation (for Individual)  
none

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  
05 / 29 / 2025

Transaction ID : 30269994

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B. Brown, Terry, , ,**

Mailing Address 813 Parker Gray School Way

City  
AlexandriaState  
VAZip Code  
22314-6402FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AASCUOccupation (for Individual)  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 19 / 2025

Transaction ID : 30269028

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C. Browning, Carol, , ,**Mailing Address 1515 Shasta Dr  
Apt 1501City  
DavisState  
CAZip Code  
95616-6679FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 29 / 2025

Transaction ID : 30268191

Amount of Each Receipt this Period

60.00

☐ Memo Item

Non-Contribution Account

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

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

160.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 36 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A.** Bruell, Marc, , ,

Mailing Address 238 Euclid Ave

City  
CarbondaleState  
COZip Code  
81623-2127FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 20 / 2025

Transaction ID : 30267196

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**B.** Brust, Colleen, , ,

Mailing Address 15 S Independence Pl

City  
GallowayState  
NJZip Code  
08205-3236FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
New Jersey DEPOccupation (for Individual)  
Research Scientist

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  
05 / 06 / 2025

Transaction ID : 30263976

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**C.** brutoco young, sheila, , ,

Mailing Address 930 Parrott Dr

City  
HillsboroughState  
CAZip Code  
94010-7415FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SelfOccupation (for Individual)  
Real estate manager and investor

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  
05 / 18 / 2025

Transaction ID : 30269686

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

250.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 37 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Bryant, Shelia, , ,**

Mailing Address 9801 Apollo Dr

City  
Upper MarlboroState  
MDZip Code  
20792-5501FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 31 / 2025

Transaction ID : 30268295

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**B. Buckley, Lee, , ,**Mailing Address 181 E 90th St  
Apt 4BCity  
New YorkState  
NYZip Code  
10128-2387FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 18 / 2025

Transaction ID : 30267025

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**C. Buis, Susan, , ,**

Mailing Address 716 Marion St NE

City  
OlympiaState  
WAZip Code  
98506-4425FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 23 / 2025

Transaction ID : 30267480

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

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

300.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 38 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Burk, Laurie, , ,**

Mailing Address 33 Wharton Ct

City  
IrvineState  
CAZip Code  
92617-4108FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 18 / 2025

Transaction ID : 30266993

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**B. Burke, Kathleen, , ,**

Mailing Address 320 Blackfield Dr

City  
TiburonState  
CAZip Code  
94920-2010FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 08 / 2025

Transaction ID : 30265509

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C. Burrill, Milton, , ,**

Mailing Address 50 Albemarle Rd

City  
AshevilleState  
NCZip Code  
28801-2030FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 06 / 2025

Transaction ID : 30264963

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

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

200.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 39 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Butler, Mark, , ,**

Mailing Address 3033 NW 67th St

City  
SeattleState  
WAZip Code  
98117-6216FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SelfOccupation (for Individual)  
Consultant

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  
05 / 04 / 2025

Transaction ID : 30269149

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B. Cadwallader, Thomas, , ,**

Mailing Address 331 Lower Dolington Rd

City  
NewtownState  
PAZip Code  
18940-3800FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
selfOccupation (for Individual)  
retired

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  
05 / 05 / 2025

Transaction ID : 30269187

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**C. Cadwallader, Thomas, , ,**

Mailing Address 331 Lower Dolington Rd

City  
NewtownState  
PAZip Code  
18940-3800FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
selfOccupation (for Individual)  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 13 / 2025

Transaction ID : 30269502

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

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

95.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 40 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Cadwallader, Thomas, , ,**

Mailing Address 331 Lower Dolington Rd

City  
NewtownState  
PAZip Code  
18940-3800FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
selfOccupation (for Individual)  
retired

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  
05 / 25 / 2025

Transaction ID : 30269871

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**B. Cahill, Sheila, , ,**

Mailing Address 4000 Massachusetts Ave NW

City  
WashingtonState  
DCZip Code  
20016-5105FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 22 / 2025

Transaction ID : 30267468

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**C. Cahill, Sheila, , ,**

Mailing Address 4000 Massachusetts Ave NW

City  
WashingtonState  
DCZip Code  
20016-5105FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 24 / 2025

Transaction ID : 30267586

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

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

225.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 41 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A.** Cancian, Maria, , ,

Mailing Address 1600 8th St NW

City  
WashingtonState  
DCZip Code  
20001-3170FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
georgetownOccupation (for Individual)  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 07 / 2025

Transaction ID : 30262731

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B.** Cancian, Maria, , ,

Mailing Address 1600 8th St NW

City  
WashingtonState  
DCZip Code  
20001-3170FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
georgetownOccupation (for Individual)  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 13 / 2025

Transaction ID : 30268461

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**C.** Carlson, Deanne, , ,

Mailing Address 1908 County Road 205

City  
DurangoState  
COZip Code  
81301-6948FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 07 / 2025

Transaction ID : 30265276

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

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

200.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 42 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Cassidy, Nancy, , ,**

Mailing Address 2297 Harvard St

City  
Palo AltoState  
CAZip Code  
94306-1359FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 20 / 2025

Transaction ID : 30267144

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B. Catron, Peggy, , ,**

Mailing Address 7723 E Appaloosa Trl

City  
OrangeState  
CAZip Code  
92869-2444FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 03 / 2025

Transaction ID : 30264474

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C. Cemore, Bernadette, , ,**Mailing Address 2128 Orange Ave  
Apt DCity  
Costa MesaState  
CAZip Code  
92627-1888FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 26 / 2025

Transaction ID : 30267804

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

150.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 43 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A.** Chafe, Jennifer, , ,

Mailing Address 329 Ferguson Rd

City  
Chapel HillState  
NCZip Code  
27516-9309FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 15 / 2025

Transaction ID : 30266611

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B.** chalfant, kathleen, , ,

Mailing Address 273 Hicks St

City  
BrooklynState  
NYZip Code  
11201-4508FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
free lanceOccupation (for Individual)  
actor

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  
05 / 28 / 2025

Transaction ID : 30268501

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C.** Champion, Dave, , ,

Mailing Address 5937 37th Ave SW

City  
SeattleState  
WAZip Code  
98126-2835FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Champion & AssociatesOccupation (for Individual)  
self employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

179.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 05 / 2025

Transaction ID : 30263317

Amount of Each Receipt this Period

26.00

☐ Memo Item

Non-Contribution Account

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

126.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 44 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Champion, Dave, , ,**

Mailing Address 5937 37th Ave SW

City  
SeattleState  
WAZip Code  
98126-2835FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Champion & AssociatesOccupation (for Individual)  
self employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 21 / 2025

Transaction ID : 30263358

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**B. Chandler, Marguerite, , ,**Mailing Address 1382 Newtown Langhorne Rd  
# N-112City  
NewtownState  
PAZip Code  
18940-2418FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 07 / 2025

Transaction ID : 30265032

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

**C. Chapman, Jeffrey, , ,**

Mailing Address 5228 Antiquity Cir

City  
FairfieldState  
CAZip Code  
94534-4169FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 05 / 2025

Transaction ID : 30264752

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

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

525.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 45 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Chayefsky, Helen, , ,**

Mailing Address 71 Bridle Path Rd

City  
OssiningState  
NYZip Code  
10562-2012FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 07 / 2025

Transaction ID : 30265319

Amount of Each Receipt this Period

30.00

☐ Memo Item

Non-Contribution Account

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

**B. Chess, David, , ,**

Mailing Address 1990 Elm St

City  
StratfordState  
CTZip Code  
06615-6331FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Tapestry TeleHealthOccupation (for Individual)  
physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 19 / 2025

Transaction ID : 30263537

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C. Chess, David, , ,**

Mailing Address 1990 Elm St

City  
StratfordState  
CTZip Code  
06615-6331FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Tapestry TeleHealthOccupation (for Individual)  
physician

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  
05 / 29 / 2025

Transaction ID : 30263950

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

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

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

100.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 46 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A.** Cioffari, Annamarie, , ,

Mailing Address 685 Beecher Hill Rd

City  
HinesburgState  
VTZip Code  
05461-9140FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
VTSU M.S. in Clinical Mental Health CoOccupation (for Individual)  
Higher Education

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 01 / 2025

Transaction ID : 30262646

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

**B.** Cioffari, Annamarie, , ,

Mailing Address 685 Beecher Hill Rd

City  
HinesburgState  
VTZip Code  
05461-9140FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
VTSU M.S. in Clinical Mental Health CoOccupation (for Individual)  
Higher Education

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 02 / 2025

Transaction ID : 30262639

Amount of Each Receipt this Period

11.00

☐ Memo Item

Non-Contribution Account

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

**C.** Cioffari, Annamarie, , ,

Mailing Address 685 Beecher Hill Rd

City  
HinesburgState  
VTZip Code  
05461-9140FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
VTSU M.S. in Clinical Mental Health CoOccupation (for Individual)  
Higher Education

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  
05 / 13 / 2025

Transaction ID : 30262647

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

46.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 47 OF 235  
(check only one)

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

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)

Indivisible Action

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

**A. Clark, Jill, , ,**

Mailing Address 8204 Cedar St

City  
Silver SpringState  
MDZip Code  
20910-5558FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Mcps

Occupation (for Individual)

Teacher

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  
05 / 25 / 2025

Transaction ID : 30269873

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**B. Clawson, Teetle, , ,**

Mailing Address 4797 NE Going St

City  
PortlandState  
ORZip Code  
97218-2001FEC 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  
05 / 12 / 2025

Transaction ID : 30266067

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**C. Clawson, Teetle, , ,**

Mailing Address 4797 NE Going St

City  
PortlandState  
ORZip Code  
97218-2001FEC 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  
05 / 16 / 2025

Transaction ID : 30266809

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

175.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 48 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Cohen, Jacqueline, , ,**

Mailing Address 201 Matoaka Rd

City  
RichmondState  
VAZip Code  
23226-2216FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
St. Catherine's SchoolOccupation (for Individual)  
Teacher

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  
05 / 13 / 2025

Transaction ID : 30263118

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**B. Cohen, Roger, , ,**

Mailing Address 2045 Keota Ln

City  
SuperiorState  
COZip Code  
80027-8118FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
selfOccupation (for Individual)  
neuropsychologist

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  
05 / 13 / 2025

Transaction ID : 30269486

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C. Cohen, Roger, , ,**

Mailing Address 2045 Keota Ln

City  
SuperiorState  
COZip Code  
80027-8118FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
selfOccupation (for Individual)  
neuropsychologist

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  
05 / 29 / 2025

Transaction ID : 30269972

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

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

175.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 49 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A.** Cohn, Cindy, , ,

Mailing Address 1015 S Van Ness Ave

City  
San FranciscoState  
CAZip Code  
94110-2615FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Electronic Frontier FoundationOccupation (for Individual)  
Executive Director

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  
05 / 22 / 2025

Transaction ID : 30262818

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B.** Cole, Raymond, , ,

Mailing Address 1817 Rangeview Dr

City  
Fort CollinsState  
COZip Code  
80524-1924FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Nimsoft CAOccupation (for Individual)  
Software Developer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 06 / 2025

Transaction ID : 30268426

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**C.** Cole, Raymond, , ,

Mailing Address 1817 Rangeview Dr

City  
Fort CollinsState  
COZip Code  
80524-1924FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Nimsoft CAOccupation (for Individual)  
Software Developer

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  
05 / 13 / 2025

Transaction ID : 30268464

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

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

100.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 50 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A.** Cole, Stephen, , ,

Mailing Address 111 E Clement St

City  
BaltimoreState  
MDZip Code  
21230-4510FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.94

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 13 / 2025

Transaction ID : 30266262

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B.** CONLIN, BETHANN, , ,

Mailing Address 20 Pinecone Ln

City  
SouthboroughState  
MAZip Code  
01772-1245FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
US GovernmentOccupation (for Individual)  
federal worker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.94

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 28 / 2025

Transaction ID : 30264241

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C.** Conner, Edwin, , ,

Mailing Address 230 E 3rd St

City  
FrankfortState  
KYZip Code  
40601-2912FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employedOccupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 27 / 2025

Transaction ID : 30267894

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

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

200.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 51 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A.** Courtney, Carole, , ,Mailing Address 1301 S 3rd Ave  
Unit 20CCity  
SequimState  
WAZip Code  
98382-3963FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 01 / 2025

Transaction ID : 30264273

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**B.** Courtney, Carole, , ,Mailing Address 1301 S 3rd Ave  
Unit 20CCity  
SequimState  
WAZip Code  
98382-3963FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 02 / 2025

Transaction ID : 30264441

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**C.** Courtney, Carole, , ,Mailing Address 1301 S 3rd Ave  
Unit 20CCity  
SequimState  
WAZip Code  
98382-3963FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 22 / 2025

Transaction ID : 30267435

Amount of Each Receipt this Period

5.00

☐ Memo Item

Non-Contribution Account

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

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

55.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 52 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Cowan, Michael, , ,**

Mailing Address 3625 Hughes Ave

City  
Los AngelesState  
CAZip Code  
90034-3910FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employedOccupation (for Individual)  
Retired

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  
05 / 27 / 2025

Transaction ID : 30267897

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**B. Cowan, Michael, , ,**

Mailing Address 3625 Hughes Ave

City  
Los AngelesState  
CAZip Code  
90034-3910FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employedOccupation (for Individual)  
Retired

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  
05 / 28 / 2025

Transaction ID : 30268029

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**C. Cramer, Beverly, , ,**

Mailing Address 1224 Hallinan Cir

City  
Lake OswegoState  
ORZip Code  
97034-4972FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

571.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 24 / 2025

Transaction ID : 30270857

Amount of Each Receipt this Period

41.94

☐ Memo Item

Non-Contribution Account

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

91.94

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 53 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Crawford, Johanna, , ,**

Mailing Address 202 Hale St

City  
BeverlyState  
MAZip Code  
01915-3849FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 22 / 2025

Transaction ID : 30267425

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B. Crawford, Meredith, , ,**

Mailing Address 217 Quincy Ave

City  
Long BeachState  
CAZip Code  
90803-1631FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Pacific Symphony freelancer (self)Occupation (for Individual)  
musician

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  
05 / 30 / 2025

Transaction ID : 30267276

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**C. Cryer, Debra, , ,**

Mailing Address 80 Whelpley Rd

City  
EasthamState  
MAZip Code  
02642-6106FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Ocean Edge LandscapingOccupation (for Individual)  
Bookkeeping

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  
05 / 30 / 2025

Transaction ID : 30263302

Amount of Each Receipt this Period

36.00

☐ Memo Item

Non-Contribution Account

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

186.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 54 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Cundill, Grier, , ,**

Mailing Address 34014 SE Moss Hill Rd

City  
EstacadaState  
ORZip Code  
97023-9464FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 10 / 2025

Transaction ID : 30265813

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**B. Curtis, Arthur, , ,**

Mailing Address 12531 W Dakota Dr

City  
LakewoodState  
COZip Code  
80228-3208FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RetiredOccupation (for Individual)  
Geologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 11 / 2025

Transaction ID : 30268752

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**C. Curtis, Arthur, , ,**

Mailing Address 12531 W Dakota Dr

City  
LakewoodState  
COZip Code  
80228-3208FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RetiredOccupation (for Individual)  
Geologist

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  
05 / 13 / 2025

Transaction ID : 30268758

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

150.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 55 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Cushman, Tera, , ,**

Mailing Address 2417 Dellwood Dr

City  
DurhamState  
NCZip Code  
27705-2204FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Duke University HospitalOccupation (for Individual)  
Anesthesiologist

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  
05 / 13 / 2025

Transaction ID : 30263121

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**B. Dana, Gregory, , ,**Mailing Address 2265 Luther Pl  
Unit 218City  
Saint PaulState  
MNZip Code  
55108-1455FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 24 / 2025

Transaction ID : 30267575

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**C. Dana, Gregory, , ,**Mailing Address 2265 Luther Pl  
Unit 218City  
Saint PaulState  
MNZip Code  
55108-1455FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 24 / 2025

Transaction ID : 30267660

Amount of Each Receipt this Period

75.00

☐ Memo Item

Non-Contribution Account

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

200.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 56 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Davila, Richard, , ,**

Mailing Address 2129 Continental Ave

City  
Costa MesaState  
CAZip Code  
92627-3311FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
noneOccupation (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  
05 / 01 / 2025

Transaction ID : 30269066

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B. Dawson, Linda, , ,**Mailing Address 4949 Genesta Ave  
Unit 103City  
EncinoState  
CAZip Code  
91316-3442FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self-employedOccupation (for Individual)  
CPA

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  
05 / 31 / 2025

Transaction ID : 30264248

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

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

**C. DeBell, John, , ,**Mailing Address 451 Oak Grove Ave  
Apt 5City  
Menlo ParkState  
CAZip Code  
94025-3243FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employedOccupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 24 / 2025

Transaction ID : 30267657

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

600.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 57 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A.** Denham, Bill, , ,

Mailing Address 4908 SE 38th Ave

City  
PortlandState  
ORZip Code  
97202-4012FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 10 / 2025

Transaction ID : 30265817

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**B.** Denham, Bill, , ,

Mailing Address 4908 SE 38th Ave

City  
PortlandState  
ORZip Code  
97202-4012FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 13 / 2025

Transaction ID : 30266402

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

**C.** Denham, Bill, , ,

Mailing Address 4908 SE 38th Ave

City  
PortlandState  
ORZip Code  
97202-4012FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 14 / 2025

Transaction ID : 30266466

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

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

60.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 58 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Denis, Gerald, , ,**Mailing Address 585 Franklin St  
Apt 2City  
MelroseState  
MAZip Code  
02176-1728FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Boston UniversityOccupation (for Individual)  
Medical research

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  
05 / 07 / 2025

Transaction ID : 30263672

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B. DiLorenzo, Andrea, , ,**Mailing Address 9807 Veirs Dr  
Apt 212City  
RockvilleState  
MDZip Code  
20850-3889FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 06 / 2025

Transaction ID : 30264864

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C. Dooley, Janet, , ,**

Mailing Address 87 Herrick Ave

City  
MiltonState  
VTZip Code  
05468-3042FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employedOccupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

355.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 21 / 2025

Transaction ID : 30267303

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

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

200.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 59 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Driesen, David, , ,**

Mailing Address 15 Bovington Ln

City  
FayettevilleState  
NYZip Code  
13066-9751FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Syracuse UniversityOccupation (for Individual)  
Law Professor

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  
05 / 03 / 2025

Transaction ID : 30263461

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B. Driesen, David, , ,**

Mailing Address 15 Bovington Ln

City  
FayettevilleState  
NYZip Code  
13066-9751FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Syracuse UniversityOccupation (for Individual)  
Law Professor

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  
05 / 05 / 2025

Transaction ID : 30263466

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**C. dubinsky, lisa, , ,**

Mailing Address 135 W 29th St

City  
New YorkState  
NYZip Code  
10001-5104FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 12 / 2025

Transaction ID : 30266027

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

125.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 60 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A.** dubinsky, lisa, , ,

Mailing Address 135 W 29th St

City  
New YorkState  
NYZip Code  
10001-5104FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 16 / 2025

Transaction ID : 30266740

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B.** DuMont, Darcy, , ,

Mailing Address 142 Pondview Dr

City  
AmherstState  
MAZip Code  
01002-3258FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 20 / 2025

Transaction ID : 30271047

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

**C.** Durbin, Anna, , ,

Mailing Address 806 Hudson Ave

City  
Takoma ParkState  
MDZip Code  
20912-6878FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Johns Hopkins UniversityOccupation (for Individual)  
Physician

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  
05 / 07 / 2025

Transaction ID : 30263098

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

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

320.00

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

PAGE 61 OF 235

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Durbin, Lynne, , ,**

Mailing Address 307 W Wind Rd

City  
BaltimoreState  
MDZip Code  
21204-6741FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
InLine LLCOccupation (for Individual)  
Consultant

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  
05 / 29 / 2025

Transaction ID : 30268507

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B. Durgin, John, , ,**

Mailing Address 5135 Newanga Ave

City  
Santa RosaState  
CAZip Code  
95405-7424FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 12 / 2025

Transaction ID : 30266086

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C. E Bouchane, Aaron, , ,**

Mailing Address 8384 Settlers Psge

City  
BrecksvilleState  
OHZip Code  
44141-1725FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
People in NeedOccupation (for Individual)  
Country Director

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  
05 / 22 / 2025

Transaction ID : 30264045

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

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

200.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 62 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. EBY, JUDITH, , ,**

Mailing Address 139 Dolomite Dr

City  
YorkState  
PAZip Code  
17408-6359FEC 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 / D D / Y Y Y Y Y Y  
05 / 17 / 2025

Transaction ID : 30266896

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B. Ecker, Charlesanna, , ,**

Mailing Address 226 Dundee Rd

City

Stamford

State

CT

Zip Code

06903-3619

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 ▼

638.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 15 / 2025

Transaction ID : 30270844

Amount of Each Receipt this Period

41.94

☐ Memo Item

Non-Contribution Account

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

**C. Edwards, Karen, , ,**

Mailing Address 132 Blackberry Dr

City

Stamford

State

CT

Zip Code

06903-1206

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 / D D / Y Y Y Y Y Y  
05 / 08 / 2025

Transaction ID : 30265594

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

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

141.94

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 63 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A.** elbaum, george, , ,

Mailing Address 2815 Vallejo St

City  
San FranciscoState  
CAZip Code  
94123-4616FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
selfOccupation (for Individual)  
businessman

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  
05 / 16 / 2025

Transaction ID : 30269628

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**B.** Elicagaray, Aline, , ,

Mailing Address 1483 Serra Dr

City  
PacificaState  
CAZip Code  
94044-4252FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NoneOccupation (for Individual)  
None

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 13 / 2025

Transaction ID : 30269491

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**C.** Elicagaray, Aline, , ,

Mailing Address 1483 Serra Dr

City  
PacificaState  
CAZip Code  
94044-4252FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NoneOccupation (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  
05 / 14 / 2025

Transaction ID : 30266511

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

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

150.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 64 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Elijah, Thea, , ,**

Mailing Address 1037 Western Ave

City  
West BrattleboroState  
VTZip Code  
05301-7133FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
selfOccupation (for Individual)  
acupuncturist

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  
05 / 28 / 2025

Transaction ID : 30269948

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B. Ellinwood, Joseph, , ,**

Mailing Address 3119 Cambridge Rd

City  
Cameron ParkState  
CAZip Code  
95682-9140FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
County Supervisors Association of CaliOccupation (for Individual)  
Lawyer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.27

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 23 / 2025

Transaction ID : 30262651

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C. Ellsmore, Cindy, , ,**

Mailing Address PO Box 422

City  
Sierra CityState  
CAZip Code  
96125-0422FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 22 / 2025

Transaction ID : 30267458

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

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

150.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 65 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Enda, Lauren, , ,**Mailing Address 3312 Emerald Lakes Dr  
Unit 22City  
CincinnatiState  
OHZip Code  
45211-1984FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 26 / 2025

Transaction ID : 30267779

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**B. Erickson, Frank, , ,**

Mailing Address 1200 Elkridge Ct

City  
SeasideState  
ORZip Code  
97138-4621FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 11 / 2025

Transaction ID : 30265901

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**C. Erickson, Frank, , ,**

Mailing Address 1200 Elkridge Ct

City  
SeasideState  
ORZip Code  
97138-4621FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 12 / 2025

Transaction ID : 30266082

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

150.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 66 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Ernsberger, Wes, , ,**

Mailing Address 19 Lake St

City  
OwegoState  
NYZip Code  
13827-1522FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 09 / 2025

Transaction ID : 30265712

Amount of Each Receipt this Period

300.00

☐ Memo Item

Non-Contribution Account

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

**B. Essenmacher, Carol, , ,**

Mailing Address 3020 Kalarama Ave

City  
PortageState  
MIZip Code  
49024-2383FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 29 / 2025

Transaction ID : 30268135

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C. Evans, Kathy, , ,**

Mailing Address 10639 Lakeshore Rd

City  
LyndonvilleState  
NYZip Code  
14098-9735FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 02 / 2025

Transaction ID : 30264432

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

400.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 67 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Faasse, Mark, , ,**

Mailing Address 1905 W Fletcher St

City  
ChicagoState  
ILZip Code  
60657-2028FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
\\Childrens Hospital of ChicagoOccupation (for Individual)  
Physician

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  
05 / 12 / 2025

Transaction ID : 30262643

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B. Faggert, Mark, , ,**

Mailing Address 6351 Arbor Way

City  
ElkridgeState  
MDZip Code  
21075-6881FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Buch ConstructionOccupation (for Individual)  
Construction Manager

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  
05 / 30 / 2025

Transaction ID : 30263747

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**C. Fahnestock, Toni, , ,**

Mailing Address 3100 Plaza De Rosa

City  
Las VegasState  
NVZip Code  
89102-4023FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employedOccupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 24 / 2025

Transaction ID : 30267558

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

175.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 68 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Fahnestock, Toni, , ,**

Mailing Address 3100 Plaza De Rosa

City  
Las VegasState  
NVZip Code  
89102-4023FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employedOccupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 29 / 2025

Transaction ID : 30268146

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**B. Falkenstein, Paula, , ,**

Mailing Address 2900 Chestnut Ridge Ct

City  
Oklahoma CityState  
OKZip Code  
73120-6104FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 06 / 2025

Transaction ID : 30264893

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C. Falkenstein, Paula, , ,**

Mailing Address 2900 Chestnut Ridge Ct

City  
Oklahoma CityState  
OKZip Code  
73120-6104FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 28 / 2025

Transaction ID : 30267954

Amount of Each Receipt this Period

15.00

☐ Memo Item

Non-Contribution Account

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

90.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 69 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Farley, Patrick, , ,**

Mailing Address 38 Brookline Dr

City  
West HartfordState  
CTZip Code  
06107-1203FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Howe First Assurance Assoc.Occupation (for Individual)  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 27 / 2025

Transaction ID : 30262966

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**B. Farno, Kathleen, , ,**

Mailing Address 308 E Ridgely Rd

City  
Lutherville TimoniumState  
MDZip Code  
21093-4432FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
selfOccupation (for Individual)  
lawyer

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  
05 / 31 / 2025

Transaction ID : 30270045

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C. Felicciardi, Barbara, , ,**

Mailing Address 3 Robin Ln

City  
PlainviewState  
NYZip Code  
11803-2216FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 24 / 2025

Transaction ID : 30267641

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

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

125.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 70 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Ficken, Patrice, , ,**

Mailing Address 135 Walnut Hill Rd

City  
Chestnut HillState  
MAZip Code  
02467-3156FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SelfOccupation (for Individual)  
Spiritual Counselor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2125.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 01 / 2025

Transaction ID : 30269079

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

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

**B. Filbert, Suzy, , ,**

Mailing Address 114 Taplow Rd

City  
BaltimoreState  
MDZip Code  
21212-3312FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 06 / 2025

Transaction ID : 30264913

Amount of Each Receipt this Period

30.00

☐ Memo Item

Non-Contribution Account

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

**C. Firstwater, Francesca, , ,**

Mailing Address 122 W Euclid Ave

City  
SpokaneState  
WAZip Code  
99205-3019FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 28 / 2025

Transaction ID : 30267993

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

555.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 71 OF 235  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

A. Fisher, Stephanie, , ,

Mailing Address 5542 Saddlebrook Dr

City  
Bethel Park

State  
PA

Zip Code  
15102-4510

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

MM / DD / YYYY  
05 / 08 / 2025

Transaction ID : 30265561

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

B. Fishman, Bobbie, , ,

Mailing Address 59 N Greenwood Ave

City  
Hopewell

State  
NJ

Zip Code  
08525-1415

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
self

Occupation (for Individual)  
bookseller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

MM / DD / YYYY  
05 / 12 / 2025

Transaction ID : 30269449

Amount of Each Receipt this Period

40.00

☐ Memo Item

Non-Contribution Account

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

C. Fishman, Monica, , ,

Mailing Address 7025 Shepard Mesa Rd

City  
Carpinteria

State  
CA

Zip Code  
93013-3133

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

MM / DD / YYYY  
05 / 16 / 2025

Transaction ID : 30266830

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

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

165.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 72 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Fishman, Monica, , ,**

Mailing Address 7025 Shepard Mesa Rd

City  
CarpinteriaState  
CAZip Code  
93013-3133FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 23 / 2025

Transaction ID : 30267512

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**B. Flores, Marion, , ,**Mailing Address 3601 Turtle Creek Blvd  
Apt 204City  
DallasState  
TXZip Code  
75219-5503FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 19 / 2025

Transaction ID : 30267112

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C. Flynn, Mary, , ,**

Mailing Address 274 North St

City  
JeffersonState  
MAZip Code  
01522-1510FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
UMassmemorialOccupation (for Individual)  
Physician

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  
05 / 03 / 2025

Transaction ID : 30262977

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

100.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 73 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A.** Flynn, Mary, , ,

Mailing Address 274 North St

City  
JeffersonState  
MAZip Code  
01522-1510FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
UMassmemorialOccupation (for Individual)  
Physician

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  
05 / 30 / 2025

Transaction ID : 30264247

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

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

**B.** Ford, Daniel, , ,

Mailing Address 207 Deepdale Dr

City  
MiddletownState  
NJZip Code  
07748-3008FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Daiichi Sankyo IncOccupation (for Individual)  
Clinical Research

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  
05 / 24 / 2025

Transaction ID : 30263637

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C.** Ford, Leeann, , ,

Mailing Address 780 Mimosa Ave

City  
EugeneState  
ORZip Code  
97405-4615FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
University of OregonOccupation (for Individual)  
Accountant

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  
05 / 06 / 2025

Transaction ID : 30263388

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

120.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 74 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A.** Ford, Leigh, , ,

Mailing Address 465 North St

City  
Feeding HillsState  
MAZip Code  
01030-1309FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Accountable Care AssociatesOccupation (for Individual)  
Physician

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  
05 / 01 / 2025

Transaction ID : 30262919

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B.** foree, sonya, , ,

Mailing Address 341 Paloma Ave

City  
San RafaelState  
CAZip Code  
94901-2024FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
City & County of San FranciscoOccupation (for Individual)  
Biologist

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  
05 / 08 / 2025

Transaction ID : 30262800

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**C.** foree, sonya, , ,

Mailing Address 341 Paloma Ave

City  
San RafaelState  
CAZip Code  
94901-2024FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
City & County of San FranciscoOccupation (for Individual)  
Biologist

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  
05 / 13 / 2025

Transaction ID : 30262805

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

100.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 75 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Fosner, Laurie, , ,**Mailing Address 26 Hayward Ave  
Apt 101City  
San MateoState  
CAZip Code  
94401-4327FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Dolby Labs

Occupation (for Individual)

Engineering Support Specialist

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  
05 / 07 / 2025

Transaction ID : 30268435

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**B. Frazier, Joan, , ,**

Mailing Address 2607 Tacito Trl

City  
JacksonvilleState  
FLZip Code  
32223-7106FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self

Occupation (for Individual)

Therapist

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  
05 / 07 / 2025

Transaction ID : 30269278

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**C. French, Emile Victor, , ,**

Mailing Address 5917 Echo St

City  
StocktonState  
CAZip Code  
95207-4733FEC 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

M M M / D D D / Y Y Y Y Y Y  
05 / 07 / 2025

Transaction ID : 30265368

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

300.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 76 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Friedenberg, Robert, , ,**Mailing Address 3525 Del Mar Heights Rd  
Ste 644City  
San DiegoState  
CAZip Code  
92130-2199FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Attorney/MediatorOccupation (for Individual)  
L/O Robert L. Friedenberg

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  
05 / 08 / 2025

Transaction ID : 30263039

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**B. Friedenberg, Robert, , ,**Mailing Address 3525 Del Mar Heights Rd  
Ste 644City  
San DiegoState  
CAZip Code  
92130-2199FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Attorney/MediatorOccupation (for Individual)  
L/O Robert L. Friedenberg

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  
05 / 16 / 2025

Transaction ID : 30263718

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

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

**C. Frischmann, Justine, , ,**

Mailing Address 85 Pikes Peak Dr

City  
San RafaelState  
CAZip Code  
94903-1121FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 13 / 2025

Transaction ID : 30266341

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

145.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 77 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Frutkin, Ann, , ,**

Mailing Address 1939 Northwood Dr

City  
IndianapolisState  
INZip Code  
46240-2743FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 01 / 2025

Transaction ID : 30264361

Amount of Each Receipt this Period

150.00

☐ Memo Item

Non-Contribution Account

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

**B. Fudge, Al, , ,**

Mailing Address 25137 SE Mirrmont PI

City  
IssaquahState  
WAZip Code  
98027-6915FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 16 / 2025

Transaction ID : 30266817

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

**C. Fulton, Mary, , ,**

Mailing Address 16 Emerson St

City  
StonehamState  
MAZip Code  
02180-2004FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 14 / 2025

Transaction ID : 30263805

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

450.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 78 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A.** Fulton, Mary, , ,

Mailing Address 16 Emerson St

City  
StonehamState  
MAZip Code  
02180-2004FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 25 / 2025

Transaction ID : 30267697

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B.** Fuson, Karen, , ,

Mailing Address 11007 Noble Ln

City  
San DiegoState  
CAZip Code  
92131-1674FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
selfOccupation (for Individual)  
researcher

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  
05 / 09 / 2025

Transaction ID : 30269384

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**C.** Gaillard, P Ann, , ,

Mailing Address 412 Richard Xing

City  
East HardwickState  
VTZip Code  
05836-9854FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 22 / 2025

Transaction ID : 30267357

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

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

250.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 79 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Gardner, Este, , ,**Mailing Address 2465 Palisade Ave  
Apt 6ECity  
BronxState  
NYZip Code  
10463-6251FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 12 / 2025

Transaction ID : 30266029

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**B. Gardner, Este, , ,**Mailing Address 2465 Palisade Ave  
Apt 6ECity  
BronxState  
NYZip Code  
10463-6251FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 23 / 2025

Transaction ID : 30267499

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**C. Gardner, Lawrence, , ,**

Mailing Address 630 W Santa Ana Ave

City  
FresnoState  
CAZip Code  
93705-0546FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Fresno Philharmonic OrchestraOccupation (for Individual)  
Musician/Teacher

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  
05 / 30 / 2025

Transaction ID : 30262875

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

60.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 80 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Garrett, Marcia, , ,**

Mailing Address 1051 Monte Verde Dr

City  
ArcadiaState  
CAZip Code  
91007-6004FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 20 / 2025

Transaction ID : 30267169

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B. Gary, Doug, , ,**

Mailing Address 536 Sea View Dr

City  
El CerritoState  
CAZip Code  
94530-3351FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self-EmployedOccupation (for Individual)  
Supportive Housing Consultant

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  
05 / 13 / 2025

Transaction ID : 30264166

Amount of Each Receipt this Period

150.00

☐ Memo Item

Non-Contribution Account

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

**C. Gates, Janet, , ,**Mailing Address 3716 N Rosser St  
Apt 201City  
AlexandriaState  
VAZip Code  
22311-3762FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 08 / 2025

Transaction ID : 30265489

Amount of Each Receipt this Period

15.00

☐ Memo Item

Non-Contribution Account

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

215.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 81 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Gates, Janet, , ,**Mailing Address 3716 N Rosser St  
Apt 201City  
AlexandriaState  
VAZip Code  
22311-3762FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 21 / 2025

Transaction ID : 30267259

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

**B. Gatz, Karen L, , ,**

Mailing Address 3718 Rose Ln

City  
AnnandaleState  
VAZip Code  
22003-1938FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
noneOccupation (for Individual)  
none

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  
05 / 31 / 2025

Transaction ID : 30270034

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C. Ghosh, Subhendu, , ,**

Mailing Address 21 Palmer St

City  
BloomfieldState  
NJZip Code  
07003-4220FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Bank of AmericaOccupation (for Individual)  
Eng Mgr

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  
05 / 01 / 2025

Transaction ID : 30263844

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

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

110.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 82 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Gillette, Paulina, , ,**Mailing Address 211 Harbor St  
Apt 24City  
FlorenceState  
ORZip Code  
97439-8648FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employedOccupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 14 / 2025

Transaction ID : 30266488

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**B. Gish, Sherry, , ,**

Mailing Address 4605 Cloverdale Loop

City  
HixsonState  
TNZip Code  
37343-4414FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employedOccupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 02 / 2025

Transaction ID : 30264390

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C. Gladstone, Edith, , ,**

Mailing Address 1080 Euclid Ave

City  
BerkeleyState  
CAZip Code  
94708-1638FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 25 / 2025

Transaction ID : 30267702

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

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

200.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 83 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A.** Glen, Lin, , ,

Mailing Address PO Box 1004

City  
Blue LakeState  
CAZip Code  
95525-1004FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employedOccupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 18 / 2025

Transaction ID : 30267018

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**B.** Goddard, Karen, , ,

Mailing Address 195 Dapplegray Rd

City  
Bell CanyonState  
CAZip Code  
91307-1053FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 16 / 2025

Transaction ID : 30266746

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C.** Goldsholl, Linda, , ,Mailing Address 8820 Shining Oceans Way  
Unit 304City  
ColumbiaState  
MDZip Code  
21045-5962FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 01 / 2025

Transaction ID : 30264283

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

200.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 84 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Goldstein, Naomi, , ,**

Mailing Address 10207 Menlo Ave

City  
Silver SpringState  
MDZip Code  
20910-1057FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
USDHHSOccupation (for Individual)  
Manager

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  
05 / 07 / 2025

Transaction ID : 30268898

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**B. Goodridge, Barbara, , ,**

Mailing Address 273 N Magnolia Ave

City  
MonroviaState  
CAZip Code  
91016-2134FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 12 / 2025

Transaction ID : 30266033

Amount of Each Receipt this Period

48.00

☐ Memo Item

Non-Contribution Account

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

**C. gordon, jane, , ,**Mailing Address 13636 Ventura Blvd  
# 519City  
Sherman OaksState  
CAZip Code  
91423-3700FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 29 / 2025

Transaction ID : 30268086

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

198.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 85 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A.** Gordon, Melinda, , ,

Mailing Address 1033 W Cornelia Ave

City  
ChicagoState  
ILZip Code  
60657-1505FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employedOccupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 08 / 2025

Transaction ID : 30265530

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B.** Gordon, Steven, , ,

Mailing Address 1143 Halifax Ave

City  
DavisState  
CAZip Code  
95616-2718FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Davis Cards & GamesOccupation (for Individual)  
Event Coordinator

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  
05 / 06 / 2025

Transaction ID : 30263471

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**C.** Gottsman, Laura, , ,

Mailing Address 1348 Cedar St

City  
San CarlosState  
CAZip Code  
94070-4754FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employedOccupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 07 / 2025

Transaction ID : 30265381

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

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

400.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 86 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Grabowski, Barbara, , ,**

Mailing Address PO Box 5678

City  
KetchumState  
IDZip Code  
83340-5678FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
noneOccupation (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  
05 / 09 / 2025

Transaction ID : 30269374

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B. Greenberg, David, , ,**

Mailing Address 227 W Leyden Rd

City  
ColrainState  
MAZip Code  
01340-9622FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 05 / 2025

Transaction ID : 30264778

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**C. Greenberg, Karen, , ,**Mailing Address 23 Sumner Rd  
Apt 1City  
BrooklineState  
MAZip Code  
02445-5737FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SelfOccupation (for Individual)  
Physician

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  
05 / 28 / 2025

Transaction ID : 30269934

Amount of Each Receipt this Period

125.00

☐ Memo Item

Non-Contribution Account

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

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

275.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 87 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Greenblatt, Rebecca, , ,**

Mailing Address 108 Ardsley Dr

City  
SyracuseState  
NYZip Code  
13214-2110FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SUNY Upstate Medical UniversityOccupation (for Individual)  
Assistant Professor

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  
05 / 02 / 2025

Transaction ID : 30262769

Amount of Each Receipt this Period

15.00

☐ Memo Item

Non-Contribution Account

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

**B. Greenblatt, Rebecca, , ,**

Mailing Address 108 Ardsley Dr

City  
SyracuseState  
NYZip Code  
13214-2110FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SUNY Upstate Medical UniversityOccupation (for Individual)  
Assistant Professor

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  
05 / 27 / 2025

Transaction ID : 30262783

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C. greissinger, michelle, , ,**

Mailing Address 222 12th St NE

City  
AtlantaState  
GAZip Code  
30309-4001FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
selfOccupation (for Individual)  
dentist

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  
05 / 07 / 2025

Transaction ID : 30269243

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

165.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 88 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Gremban, Ronald, , ,**

Mailing Address 44 Creekside Ct

City  
Corte MaderaState  
CAZip Code  
94925-1268FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ForSites Corp.Occupation (for Individual)  
Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1550.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 25 / 2025

Transaction ID : 30264053

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

**B. Gremban, Ronald, , ,**

Mailing Address 44 Creekside Ct

City  
Corte MaderaState  
CAZip Code  
94925-1268FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ForSites Corp.Occupation (for Individual)  
Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1625.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 28 / 2025

Transaction ID : 30264057

Amount of Each Receipt this Period

75.00

☐ Memo Item

Non-Contribution Account

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

**C. Griswold, Margot, , ,**

Mailing Address 3773 Moore St

City  
Los AngelesState  
CAZip Code  
90066-3534FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
land IQ LLCOccupation (for Individual)  
Ecologist

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  
05 / 13 / 2025

Transaction ID : 30268351

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

575.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 89 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Groom, Krissy, , ,**

Mailing Address 3588 Merrimac Ave

City  
San DiegoState  
CAZip Code  
92117-1716FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
IndeedOccupation (for Individual)  
UX Researcher

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  
05 / 28 / 2025

Transaction ID : 30268950

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B. Groom, Vicky, , ,**

Mailing Address 430 Sonoma Dr

City  
CloverdaleState  
CAZip Code  
95425-5444FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 08 / 2025

Transaction ID : 30265567

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**C. Haapala, Helene, , ,**

Mailing Address 1582 Independence Dr

City  
NorthfieldState  
MNZip Code  
55057-4594FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self-EmployedOccupation (for Individual)  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

217.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 31 / 2025

Transaction ID : 30270984

Amount of Each Receipt this Period

78.27

☐ Memo Item

Non-Contribution Account

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

228.27

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 90 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Hager, Bryan, , ,**

Mailing Address 2314 Pleasant Ridge Rd

City  
BremenState  
GAZip Code  
30110-4834FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
selfOccupation (for Individual)  
farmer

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  
05 / 18 / 2025

Transaction ID : 30269678

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B. Hahn, Janee, , ,**

Mailing Address 6514 Dibble Ave NW

City  
SeattleState  
WAZip Code  
98117-5137FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 21 / 2025

Transaction ID : 30267328

Amount of Each Receipt this Period

75.00

☐ Memo Item

Non-Contribution Account

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

**C. Halstead, David, , ,**Mailing Address 22 McTernan St  
# 1City  
CambridgeState  
MAZip Code  
02139-3902FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Foley Hoag LLPOccupation (for Individual)  
Patent Attorney

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  
05 / 10 / 2025

Transaction ID : 30263992

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

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

625.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 91 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Hamilton, Laura, , ,**

Mailing Address 707 Randolph Ave SE

City  
HuntsvilleState  
ALZip Code  
35801-3606FEC 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

M M M / D D D / Y Y Y Y Y Y  
05 / 07 / 2025

Transaction ID : 30265183

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**B. Hamilton, Tanya, , ,**

Mailing Address 1438 W 45th St

City  
Los AngelesState  
CAZip Code  
90062-2040FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self

Occupation (for Individual)

Filmmaker

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  
05 / 29 / 2025

Transaction ID : 30269971

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C. Hamm, Benjamin, , ,**

Mailing Address 3722 36th Ave SW

City  
SeattleState  
WAZip Code  
98126-2404FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

OctoAI

Occupation (for Individual)

Product Manager

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  
05 / 30 / 2025

Transaction ID : 30268958

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

250.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 92 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A.** Haraburd, Suzanne M., , ,

Mailing Address 633 Bonnie Brae Pl

City  
River ForestState  
ILZip Code  
60305-1928FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employedOccupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 13 / 2025

Transaction ID : 30266268

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**B.** Harland, Donald, , ,

Mailing Address PO Box 2080

City  
CandlerState  
NCZip Code  
28715-2080FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HospitalOccupation (for Individual)  
Nurse

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  
05 / 11 / 2025

Transaction ID : 30268623

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**C.** Harland, Donald, , ,

Mailing Address PO Box 2080

City  
CandlerState  
NCZip Code  
28715-2080FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HospitalOccupation (for Individual)  
Nurse

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

890.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 14 / 2025

Transaction ID : 30268640

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

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

250.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 93 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Harland, Donald, , ,**

Mailing Address PO Box 2080

City  
CandlerState  
NCZip Code  
28715-2080FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HospitalOccupation (for Individual)  
Nurse

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

925.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 27 / 2025

Transaction ID : 30268665

Amount of Each Receipt this Period

35.00

☐ Memo Item

Non-Contribution Account

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

**B. Harman, Janice, , ,**

Mailing Address 20200 Paradise Ln

City  
TopangaState  
CAZip Code  
90290-3740FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SelfOccupation (for Individual)  
Teacher/tutor /writer

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  
05 / 20 / 2025

Transaction ID : 30269720

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C. Hayes, Ken, , ,**

Mailing Address 2500 NW Phillips Rd

City  
GastonState  
ORZip Code  
97119-8246FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
selfOccupation (for Individual)  
self employed-investor-day trader-libe

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  
05 / 12 / 2025

Transaction ID : 30269453

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

185.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 94 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A.** Hays, Chris, , ,

Mailing Address 1027 Wiladonda Dr

City  
La Canada FlintridgeState  
CAZip Code  
91011-2316FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 14 / 2025

Transaction ID : 30266493

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B.** Haywood, Julian, , ,

Mailing Address 502 H St SW

City  
WashingtonState  
DCZip Code  
20024-2726FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FORGE Federal AffairsOccupation (for Individual)  
Lobbyist

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  
05 / 16 / 2025

Transaction ID : 30263349

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

**C.** Heacox, Melanie, , ,

Mailing Address PO Box 359

City  
GustavusState  
AKZip Code  
99826-0359FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 25 / 2025

Transaction ID : 30267733

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

400.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 95 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Hearn, Susan, , ,**

Mailing Address 2613 Gregor McGregor Blvd

City  
Fernandina BeachState  
FLZip Code  
32034-2246FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 05 / 2025

Transaction ID : 30264791

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**B. henkin, michelle, , ,**

Mailing Address 15 Pipers Way

City  
New HarborState  
MEZip Code  
04554-4856FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 05 / 2025

Transaction ID : 30264832

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C. Henley, Sheryl, , ,**

Mailing Address 404 Park Ridge Ave

City  
Temple TerraceState  
FLZip Code  
33617-4145FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 15 / 2025

Transaction ID : 30266603

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

200.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 96 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Henley, Sheryl, , ,**

Mailing Address 404 Park Ridge Ave

City

Temple Terrace

State

FL

Zip Code

33617-4145

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  
05 / 27 / 2025

Transaction ID : 30267895

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B. Herman, Judith, , ,**

Mailing Address 30539 Rhone Dr

City

Rancho Palos Verdes

State

CA

Zip Code

90275-5742

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  
05 / 14 / 2025

Transaction ID : 30266543

Amount of Each Receipt this Period

125.00

☐ Memo Item

Non-Contribution Account

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

**C. Hintz, Jerry, , ,**

Mailing Address 1903 Columbine Ct

City

Golden

State

CO

Zip Code

80401-9101

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  
05 / 18 / 2025

Transaction ID : 30267030

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

275.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 97 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A.** Hintze, Ray, , ,

Mailing Address 3447 Windsor Ct

City  
PleasantonState  
CAZip Code  
94588-3545FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 08 / 2025

Transaction ID : 30265501

Amount of Each Receipt this Period

200.00

☐ Memo Item

Non-Contribution Account

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

**B.** Hoffman, Douglas, , ,

Mailing Address 10208 Ascot Crossing St

City  
BakersfieldState  
CAZip Code  
93311-4958FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
selfOccupation (for Individual)  
surgeon

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  
05 / 20 / 2025

Transaction ID : 30269718

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C.** Holland, Martha, , ,

Mailing Address 121 Penns Grant Dr

City  
MorrisvilleState  
PAZip Code  
19067-4918FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employedOccupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 01 / 2025

Transaction ID : 30264292

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

275.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 98 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A.** Holland, Martha, , ,

Mailing Address 121 Penns Grant Dr

City  
MorrisvilleState  
PAZip Code  
19067-4918FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employedOccupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 13 / 2025

Transaction ID : 30266375

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**B.** Holland, Martha, , ,

Mailing Address 121 Penns Grant Dr

City  
MorrisvilleState  
PAZip Code  
19067-4918FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employedOccupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 18 / 2025

Transaction ID : 30266971

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**C.** HOLLINGSBED, BILLY, , ,Mailing Address 9504 Silver Collection Cir  
Apt 103City  
FredericksburgState  
VAZip Code  
22408-7820FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Noblis NSP LLCOccupation (for Individual)  
Software Developer

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  
05 / 29 / 2025

Transaction ID : 30264060

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

100.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 99 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Holmes, Dylan, , ,**Mailing Address 1855 Trossachs Blvd SE  
Unit 1404City  
SammamishState  
WAZip Code  
98075-5936FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Guild EducationOccupation (for Individual)  
Group Product Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

797.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 05 / 2025

Transaction ID : 30263856

Amount of Each Receipt this Period

199.00

☐ Memo Item

Non-Contribution Account

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

**B. Hopkins, Judith, , ,**Mailing Address 844 7th St  
Apt 7City  
Santa MonicaState  
CAZip Code  
90403-1450FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
retiredOccupation (for Individual)  
retired

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  
05 / 05 / 2025

Transaction ID : 30268697

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**C. Hopkins, Judith, , ,**Mailing Address 844 7th St  
Apt 7City  
Santa MonicaState  
CAZip Code  
90403-1450FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
retiredOccupation (for Individual)  
retired

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  
05 / 21 / 2025

Transaction ID : 30268816

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

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

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

244.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 100 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A.** Hourihan, Judith, , ,

Mailing Address 7 Murray Hill Rd

City  
WarrenState  
VTZip Code  
05674FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

195.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 14 / 2025

Transaction ID : 30266567

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**B.** Hourihan, Judith, , ,

Mailing Address 7 Murray Hill Rd

City  
WarrenState  
VTZip Code  
05674FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 21 / 2025

Transaction ID : 30267348

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

**C.** House, Tim, , ,

Mailing Address 92 Elm St

City  
UptonState  
MAZip Code  
01568-1125FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
First Church in BostonOccupation (for Individual)  
Minister

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  
05 / 28 / 2025

Transaction ID : 30263295

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

85.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 101 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A.** Howard, Connie, , ,

Mailing Address 439 Monroe Dr

City  
Palo AltoState  
CAZip Code  
94306-4420FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ETMGOccupation (for Individual)  
Writer

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  
05 / 26 / 2025

Transaction ID : 30269894

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**B.** Hoyt, Linda, , ,

Mailing Address PO Box 2818

City  
IssaquahState  
WAZip Code  
98027-0129FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SelfOccupation (for Individual)  
Artist

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  
05 / 28 / 2025

Transaction ID : 30269958

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C.** Huesmann, Graham, , ,

Mailing Address 409 W Nevada St

City  
UrbanaState  
ILZip Code  
61801-4110FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CarleOccupation (for Individual)  
Physician

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  
05 / 25 / 2025

Transaction ID : 30269044

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

125.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 102 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Hughes, Heather, , ,**

Mailing Address 7907 N Wellington Ct

City  
HoustonState  
TXZip Code  
77055-3510FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AonOccupation (for Individual)  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 03 / 2025

Transaction ID : 30270058

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**B. Hughes, Heather, , ,**

Mailing Address 7907 N Wellington Ct

City  
HoustonState  
TXZip Code  
77055-3510FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AonOccupation (for Individual)  
VP

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  
05 / 07 / 2025

Transaction ID : 30270087

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C. Huisman, Janny, , ,**Mailing Address 218 Myrtle Ave  
Apt 8FCity  
BrooklynState  
NYZip Code  
11201-3935FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 04 / 2025

Transaction ID : 30264658

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

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

200.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 103 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Huisman, Janny, , ,**Mailing Address 218 Myrtle Ave  
Apt 8FCity  
BrooklynState  
NYZip Code  
11201-3935FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 14 / 2025

Transaction ID : 30266489

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B. Hult, Carol, , ,**

Mailing Address 1213 W Kouskov St

City  
KodiakState  
AKZip Code  
99615-6751FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SelfOccupation (for Individual)  
Writer

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  
05 / 10 / 2025

Transaction ID : 30269395

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C. Humphrey, Karalyn, , ,**

Mailing Address 305 Russell Ln

City  
HewittState  
TXZip Code  
76643-3418FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Baylor UniversityOccupation (for Individual)  
Health & Safety

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  
05 / 13 / 2025

Transaction ID : 30263697

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

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

105.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 104 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Huntsberger, Beverly, , ,**

Mailing Address 3030 El Nido Dr

City  
AltadenaState  
CAZip Code  
91001-4568FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
noneOccupation (for Individual)  
none

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 13 / 2025

Transaction ID : 30269532

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B. Ibarra, Gayle, , ,**

Mailing Address 4211 Park Ave

City  
NashvilleState  
TNZip Code  
37209-3649FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 02 / 2025

Transaction ID : 30264406

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C. Ibrahim, Lisa, , ,**

Mailing Address 29422 NE 173rd St

City  
DuvallState  
WAZip Code  
98019-8614FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Hanson Consulting GroupOccupation (for Individual)  
Xbox marketing producer

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  
05 / 13 / 2025

Transaction ID : 30263193

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

200.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 105 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A.** Inama, Michelle, , ,

Mailing Address 1180 7th Ave

City  
SacramentoState  
CAZip Code  
95818-3743FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
The Nature ConservancyOccupation (for Individual)  
Paralegal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 01 / 2025

Transaction ID : 30263229

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**B.** Inama, Michelle, , ,

Mailing Address 1180 7th Ave

City  
SacramentoState  
CAZip Code  
95818-3743FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
The Nature ConservancyOccupation (for Individual)  
Paralegal

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  
05 / 13 / 2025

Transaction ID : 30263266

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**C.** isobel, christina, , ,

Mailing Address 8905 Barnett Valley Rd

City  
SebastopolState  
CAZip Code  
95472-9564FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
self employedOccupation (for Individual)  
poet

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  
05 / 03 / 2025

Transaction ID : 30264075

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

150.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 106 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A.** Jackson, David E., , ,

Mailing Address 208 Columbia Ave

City  
KensingtonState  
CAZip Code  
94708-1141FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 28 / 2025

Transaction ID : 30268025

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**B.** Jellinek, Ted, , ,

Mailing Address 149 Coonamessett Cir

City  
East FalmouthState  
MAZip Code  
02536-4041FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 07 / 2025

Transaction ID : 30265132

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**C.** johnson, melinda, , ,

Mailing Address 1844 Sunset Dr

City  
VenturaState  
CAZip Code  
93001-2357FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
selfOccupation (for Individual)  
arbitrator/mediator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 16 / 2025

Transaction ID : 30269615

Amount of Each Receipt this Period

35.00

☐ Memo Item

Non-Contribution Account

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

235.00

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

FOR LINE NUMBER: PAGE 107 OF 235

(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

A. johnson, melinda, , ,

Mailing Address 1844 Sunset Dr

City  
VenturaState  
CAZip Code  
93001-2357FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
selfOccupation (for Individual)  
arbitrator/mediator

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  
05 / 18 / 2025

Transaction ID : 30269672

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

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

B. Johnston, Lydia, , ,

Mailing Address PO Box 630

City

Arroyo Hondo

State

NM

Zip Code

87513-0630

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Lydia JohnstonOccupation (for Individual)  
artist

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  
05 / 19 / 2025

Transaction ID : 30264028

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

C. Jones, Scott, , ,

Mailing Address PO Box 2026

City

Angel Fire

State

NM

Zip Code

87710-2026

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
selfOccupation (for Individual)  
Writer

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  
05 / 22 / 2025

Transaction ID : 30269791

Amount of Each Receipt this Period

300.00

☐ Memo Item

Non-Contribution Account

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

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

420.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 108 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Kalichman, Miriam, , ,**Mailing Address 990 N Lake Shore Dr  
Apt 4CCity  
ChicagoState  
ILZip Code  
60611-1368FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employedOccupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 07 / 2025

Transaction ID : 30265322

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**B. Kalichman, Miriam, , ,**Mailing Address 990 N Lake Shore Dr  
Apt 4CCity  
ChicagoState  
ILZip Code  
60611-1368FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employedOccupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 31 / 2025

Transaction ID : 30268288

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**C. Kappe, Bernhard, , ,**

Mailing Address 1205 Edmer Ave

City  
Oak ParkState  
ILZip Code  
60302-1133FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
OrthogonalOccupation (for Individual)  
Software Developer

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  
05 / 08 / 2025

Transaction ID : 30268441

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

75.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 109 OF 235  
(check only one)

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

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)

Indivisible Action

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

**A. Karlin-Neumann, George, , ,**

Mailing Address 1064 Arrowhead Way

City  
Palo AltoState  
CAZip Code  
94303-3516FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.09

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 12 / 2025

Transaction ID : 30271046

Amount of Each Receipt this Period

220.09

☐ Memo Item

Non-Contribution Account

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

**B. Karnos, Kristine, , ,**

Mailing Address 1724 Fabian Dr

City  
San JoseState  
CAZip Code  
95124-1911FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Intel corporationOccupation (for Individual)  
Engineer

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  
05 / 15 / 2025

Transaction ID : 30263715

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

**C. Kaufman, Allan, , ,**

Mailing Address 12 Whitman Ct

City  
TeaneckState  
NJZip Code  
07666-6479FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FTI ConsultingOccupation (for Individual)  
Actuary

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  
05 / 23 / 2025

Transaction ID : 30264048

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

280.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 110 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Kaufmann, Bear, , ,**

Mailing Address 1274 64th St

City  
EmeryvilleState  
CAZip Code  
94608-1105FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
APLOccupation (for Individual)  
CS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 14 / 2025

Transaction ID : 30270131

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

**B. Keith, Ian, , ,**

Mailing Address 1224 Garfield St

City  
Port TownsendState  
WAZip Code  
98368-6515FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employedOccupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 11 / 2025

Transaction ID : 30265915

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**C. Kellas, Elizabeth, , ,**

Mailing Address 412 W Richmond Ave

City  
Pt RichmondState  
CAZip Code  
94801-3865FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 15 / 2025

Transaction ID : 30266694

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

400.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 111 OF 235  
(check only one)

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

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)

Indivisible Action

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

**A. Keller, Marie, , ,**

Mailing Address 6487 Cavalleri Rd

City  
MalibuState  
CAZip Code  
90265-4063FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SelfOccupation (for Individual)  
Lmft

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.27

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 31 / 2025

Transaction ID : 30270037

Amount of Each Receipt this Period

45.00

☐ Memo Item

Non-Contribution Account

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

**B. Kellner, Debra, , ,**

Mailing Address 12627 Second Ave S

City  
SouthgateState  
MIZip Code  
48195-3544FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 12 / 2025

Transaction ID : 30266084

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**C. Kelly, John, , ,**

Mailing Address 405 Tower Hill Ave

City  
San JoseState  
CAZip Code  
95136-3762FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NetflixOccupation (for Individual)  
Software Developer

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  
05 / 17 / 2025

Transaction ID : 30268796

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

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

645.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 112 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Kelly, Kathy, , ,**

Mailing Address 1158 W 126th Ct

City  
WestminsterState  
COZip Code  
80234-1746FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Wolters kluwerOccupation (for Individual)  
Sales

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  
05 / 20 / 2025

Transaction ID : 30264029

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B. Kennedy, Margaret, , ,**

Mailing Address 1580 NW 100th Ter

City  
PlantationState  
FLZip Code  
33322-6509FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 07 / 2025

Transaction ID : 30265158

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C. Keyles, Claire, , ,**

Mailing Address 169 Clarken Dr

City  
West OrangeState  
NJZip Code  
07052-3429FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 07 / 2025

Transaction ID : 30265311

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

125.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 113 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Keyles, Claire, , ,**

Mailing Address 169 Clarken Dr

City  
West OrangeState  
NJZip Code  
07052-3429FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 30 / 2025

Transaction ID : 30268222

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**B. Kingston, Mary, , ,**

Mailing Address 16817 Upper 20th St S

City  
LakelandState  
MNZip Code  
55043-9416FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
selfOccupation (for Individual)  
marriage and family therapist

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  
05 / 13 / 2025

Transaction ID : 30269553

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C. Kitts, Johnny, , ,**

Mailing Address 8824 Applecross Ln

City  
SpringfieldState  
VAZip Code  
22153-1248FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 22 / 2025

Transaction ID : 30267360

Amount of Each Receipt this Period

125.00

☐ Memo Item

Non-Contribution Account

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

200.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 114 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Klee, Mary Ellen, , ,**

Mailing Address 1235 Rimmer Ave

City  
Pacific PalisadesState  
CAZip Code  
90272-2546FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
selfOccupation (for Individual)  
acupuncturist

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  
05 / 19 / 2025

Transaction ID : 30269697

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**B. Klein, Jane, , ,**

Mailing Address 2000 Broadway

City  
New YorkState  
NYZip Code  
10023-5028FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 08 / 2025

Transaction ID : 30265498

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C. KLEMENT, SUSAN, , ,**

Mailing Address 8618 S River Terrace Dr

City  
FranklinState  
WIZip Code  
53132-8231FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employedOccupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 09 / 2025

Transaction ID : 30265741

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

250.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 115 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A.** Klor, Ellin, , ,

Mailing Address 3056 Ramona St

City  
Palo AltoState  
CAZip Code  
94306-2370FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 29 / 2025

Transaction ID : 30268181

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B.** Klor, Ellin, , ,

Mailing Address 3056 Ramona St

City  
Palo AltoState  
CAZip Code  
94306-2370FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 30 / 2025

Transaction ID : 30262709

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**C.** Knupp, Robin, , ,Mailing Address 4 Long Shoals Rd  
# B453City  
ArdenState  
NCZip Code  
28704-5544FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 24 / 2025

Transaction ID : 30267614

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

175.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 116 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Kolasa, Gary, , ,**

Mailing Address 21963 Bellwood St

City  
WoodhavenState  
MIZip Code  
48183-1545FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 17 / 2025

Transaction ID : 30266878

Amount of Each Receipt this Period

63.00

☐ Memo Item

Non-Contribution Account

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

**B. Koons, Carolyn, , ,**

Mailing Address 390 Hoguertel Hill Ct

City  
AuburnState  
CAZip Code  
95603-9312FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 04 / 2025

Transaction ID : 30264676

Amount of Each Receipt this Period

150.00

☐ Memo Item

Non-Contribution Account

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

**C. Korzekwa, Nathaniel, , ,**Mailing Address 2634 30th St  
Apt 2CCity  
AstoriaState  
NYZip Code  
11102-2167FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
IBMOccupation (for Individual)  
Software Developer

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  
05 / 07 / 2025

Transaction ID : 30270091

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

313.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 117 OF 235  
(check only one)

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

Indivisible Action

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

**A.** Kreklau, Mary E, , ,

Mailing Address 3997 Nelson Dr

City  
NewportState  
MIZip Code  
48166-9007FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 01 / 2025

Transaction ID : 30264291

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B.** kresser, robert, , ,

Mailing Address 634 17th St

City  
Manhattan BeachState  
CAZip Code  
90266-4809FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
k2 communicationsOccupation (for Individual)  
Film producer

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  
05 / 07 / 2025

Transaction ID : 30263678

Amount of Each Receipt this Period

75.00

☐ Memo Item

Non-Contribution Account

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

**C.** Krome, Elizabeth, , ,

Mailing Address 105 Morningside Dr

City  
CarrboroState  
NCZip Code  
27510-1254FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
selfOccupation (for Individual)  
potter

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  
05 / 01 / 2025

Transaction ID : 30269085

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

150.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 118 OF 235  
(check only one)

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

Indivisible Action

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

**A. Krome, Elizabeth, , ,**

Mailing Address 105 Morningside Dr

City  
CarrboroState  
NCZip Code  
27510-1254FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
selfOccupation (for Individual)  
potter

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  
05 / 21 / 2025

Transaction ID : 30269739

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**B. Krueger, Andrea, , ,**

Mailing Address 906 Viewpointe Dr

City  
St CharlesState  
ILZip Code  
60174-4184FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CDHOccupation (for Individual)  
Accountant

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  
05 / 26 / 2025

Transaction ID : 30270184

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**C. Laden, Jonathan, , ,**

Mailing Address 3111 Rittenhouse St NW

City  
WashingtonState  
DCZip Code  
20015-1614FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Daily Science FictionOccupation (for Individual)  
Publisher

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  
05 / 30 / 2025

Transaction ID : 30263368

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

225.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 119 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A.** Lando, Harry, , ,Mailing Address 4300 W River Pkwy  
Apt 312City  
MinneapolisState  
MNZip Code  
55406-3679FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 27 / 2025

Transaction ID : 30267881

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B.** Larkey, Linda, , ,

Mailing Address 4249 E Ludlow Dr

City  
PhoenixState  
AZZip Code  
85032-5827FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ASUOccupation (for Individual)  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 01 / 2025

Transaction ID : 30270048

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C.** Larkey, Linda, , ,

Mailing Address 4249 E Ludlow Dr

City  
PhoenixState  
AZZip Code  
85032-5827FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ASUOccupation (for Individual)  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 22 / 2025

Transaction ID : 30270166

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

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

125.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 120 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A.** Larocca, Robert, , ,

Mailing Address 6652 Dartmoor Way

City  
San JoseState  
CAZip Code  
95129-3816FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 13 / 2025

Transaction ID : 30266364

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**B.** Laska, Mark, , ,

Mailing Address 501 NE 9th St

City  
CoupevilleState  
WAZip Code  
98239-3481FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 04 / 2025

Transaction ID : 30264671

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**C.** Learson, Lynn, , ,

Mailing Address 1182 Macpherson Dr

City  
West ChesterState  
PAZip Code  
19380-3814FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employedOccupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 12 / 2025

Transaction ID : 30266007

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

250.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 121 OF 235  
(check only one)

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

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)

Indivisible Action

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

**A. Learson, Lynn, , ,**

Mailing Address 1182 Macpherson Dr

City  
West ChesterState  
PAZip Code  
19380-3814FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employedOccupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 20 / 2025

Transaction ID : 30267240

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**B. LeBlanc, Rachel, , ,**

Mailing Address 2 Olivia Way

City  
SeekonkState  
MAZip Code  
02771-5341FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WPIOccupation (for Individual)  
Higher Education

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  
05 / 05 / 2025

Transaction ID : 30270070

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C. LeClair, Amelia, , ,**

Mailing Address 12 Jenison St

City  
NewtonvilleState  
MAZip Code  
02460-1414FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employedOccupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 20 / 2025

Transaction ID : 30267204

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

125.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 122 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Lennartson, Kathleen, , ,**

Mailing Address 1608 Langridge Ave NW

City  
OlympiaState  
WAZip Code  
98502-4646FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 24 / 2025

Transaction ID : 30267639

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B. Leonard, Jennifer, , ,**

Mailing Address 285 Council Rock Ave

City  
RochesterState  
NYZip Code  
14610-3333FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 13 / 2025

Transaction ID : 30266334

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C. Lessard, Cher, , ,**

Mailing Address 721 Lake Cove Pointe Cir

City  
Winter GardenState  
FLZip Code  
34787-2684FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 12 / 2025

Transaction ID : 30266041

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

150.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 123 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Levy, Ellen, , ,**

Mailing Address 9220 Whitney St

City  
Silver SpringState  
MDZip Code  
20901-3534FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Federal Reserve BoardOccupation (for Individual)  
Editor

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  
05 / 21 / 2025

Transaction ID : 30263357

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B. Levy, Linda, , ,**

Mailing Address 416 Westdale Dr

City  
Santa CruzState  
CAZip Code  
95060-9446FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 07 / 2025

Transaction ID : 30265094

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C. Lewallen, Susan, , ,**

Mailing Address 17602 Marymont Pl

City  
San DiegoState  
CAZip Code  
92128-2046FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 07 / 2025

Transaction ID : 30265051

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

200.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 124 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Lewis, Emily, , ,**

Mailing Address 795 Elk Mountain Rd

City  
AftonState  
VAZip Code  
22920-2522FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 06 / 2025

Transaction ID : 30264911

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B. Lewis, Julia, , ,**

Mailing Address 10 Netowa Ln

City  
NantucketState  
MAZip Code  
02554-4331FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 12 / 2025

Transaction ID : 30266026

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

**C. Lezotte, Ruth, , ,**

Mailing Address 8832 E San Rafael Dr

City  
ScottsdaleState  
AZZip Code  
85258-1929FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 23 / 2025

Transaction ID : 30267514

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

350.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 125 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Lineback, Nancy, , ,**Mailing Address 775 Buena Vista Ave  
Unit BCity  
AlamedaState  
CAZip Code  
94501-2115FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Alameda CountyOccupation (for Individual)  
Nurse

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  
05 / 23 / 2025

Transaction ID : 30264046

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B. Little, William, , ,**

Mailing Address 5655 N Clark St

City  
ChicagoState  
ILZip Code  
60660-4129FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 08 / 2025

Transaction ID : 30265557

Amount of Each Receipt this Period

5.00

☐ Memo Item

Non-Contribution Account

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

**C. Little, William, , ,**

Mailing Address 5655 N Clark St

City  
ChicagoState  
ILZip Code  
60660-4129FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 24 / 2025

Transaction ID : 30267576

Amount of Each Receipt this Period

8.00

☐ Memo Item

Non-Contribution Account

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

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

63.00

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

PAGE 126 OF 235

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A.** Little, William, , ,

Mailing Address 5655 N Clark St

City  
ChicagoState  
ILZip Code  
60660-4129FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 29 / 2025

Transaction ID : 30268147

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B.** Litwin, Eileen, , ,

Mailing Address 67 Litwin Rd

City  
LitchfieldState  
CTZip Code  
06759-3113FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employedOccupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 01 / 2025

Transaction ID : 30264333

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C.** Livingston, Philip, , ,

Mailing Address 156 Est 79Th St

City  
New YorkState  
NYZip Code  
10075FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employedOccupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 28 / 2025

Transaction ID : 30267943

Amount of Each Receipt this Period

200.00

☐ Memo Item

Non-Contribution Account

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

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

300.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 127 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Lochart, James, , ,**Mailing Address 334 W 87th St  
Apt 6BCity  
New YorkState  
NYZip Code  
10024-2615FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Hearst magazinesOccupation (for Individual)  
Editor

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  
05 / 14 / 2025

Transaction ID : 30263806

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B. Lock, Patti, , ,**

Mailing Address PO Box 85

City  
Hannawa FallsState  
NYZip Code  
13647-0085FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
St. Lawrence UniversityOccupation (for Individual)  
Professor of Mathematics

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  
05 / 06 / 2025

Transaction ID : 30263164

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**C. Loewenstern, Karen, , ,**Mailing Address 9000 W 3rd St  
Unit 903City  
Los AngelesState  
CAZip Code  
90048-3139FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 13 / 2025

Transaction ID : 30266397

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

400.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 128 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Loh, Elaine, , ,**

Mailing Address 3070 Ewing Ave

City  
AltadenaState  
CAZip Code  
91001-4808FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SelfOccupation (for Individual)  
Actor and Tutor

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  
05 / 25 / 2025

Transaction ID : 30269875

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B. Lowenberg, Peggie, , ,**

Mailing Address 98 Preston C

City  
Boca RatonState  
FLZip Code  
33434-2470FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self-EmployedOccupation (for Individual)  
Professional Artist & Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 17 / 2025

Transaction ID : 30271045

Amount of Each Receipt this Period

203.20

☐ Memo Item

Non-Contribution Account

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

**C. Lowry, Eve, , ,**

Mailing Address PO Box 1367

City  
Shingle SpringsState  
CAZip Code  
95682-1367FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Kaiser PermanenteOccupation (for Individual)  
registered dietitian

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  
05 / 07 / 2025

Transaction ID : 30263676

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

303.20



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 129 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Loyd, Douglas, , ,**Mailing Address 470 Malcolm X Blvd  
Apt 16ECity  
New YorkState  
NYZip Code  
10037-3037FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employedOccupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 24 / 2025

Transaction ID : 30267633

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B. Lubsen, Chip and Laurie, , ,**

Mailing Address 13215 Stable Brook Way

City  
HerndonState  
VAZip Code  
20171-2926FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 27 / 2025

Transaction ID : 30267929

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C. Luckey, Marjorie, , ,**

Mailing Address 1540 Weimer Rd

City  
TaosState  
NMZip Code  
87571-6994FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BarnabasHealthOccupation (for Individual)  
physician

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  
05 / 05 / 2025

Transaction ID : 30263967

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

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

125.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 130 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Luckey, Marjorie, , ,**

Mailing Address 1540 Weimer Rd

City  
TaosState  
NMZip Code  
87571-6994FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BarnabasHealthOccupation (for Individual)  
physician

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  
05 / 13 / 2025

Transaction ID : 30264007

Amount of Each Receipt this Period

75.00

☐ Memo Item

Non-Contribution Account

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

**B. Ludwig, Chris, , ,**

Mailing Address 7 Weir St

City

Auburndale

State

MA

Zip Code

02466-2518

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
IQVIAOccupation (for Individual)  
Consultant

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  
05 / 08 / 2025

Transaction ID : 30268987

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C. Luke, Nancy, , ,**

Mailing Address 1181 Grand River Dr

City

Sacramento

State

CA

Zip Code

95831-4419

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 12 / 2025

Transaction ID : 30266079

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

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

225.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 131 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A.** Lynch, Roberta, , ,

Mailing Address 7 Wurts Ave

City  
New PaltzState  
NYZip Code  
12561-2308FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 21 / 2025

Transaction ID : 30267308

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B.** Lynn, Heidi, , ,

Mailing Address 4105 Cortez Way

City  
Spring ValleyState  
CAZip Code  
91977-1319FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 12 / 2025

Transaction ID : 30265995

Amount of Each Receipt this Period

35.00

☐ Memo Item

Non-Contribution Account

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

**C.** Lyons, Tina, , ,

Mailing Address PO Box 2249

City  
La PineState  
ORZip Code  
97739-2249FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 04 / 2025

Transaction ID : 30264628

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

185.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 132 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. M&T Bank**Mailing Address 555 12th St NW  
Ste 2City  
WashingtonState  
DCZip Code  
20004-1200FEC 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 ▼

9395.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 31 / 2025

Transaction ID : 30262637

Amount of Each Receipt this Period

2176.72

☐ Memo Item

Banking interest

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

**B. MacInnes, Betsy, , ,**

Mailing Address 4220 243rd PI SE

City  
IssaquahState  
WAZip Code  
98029-7554FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Not Employed

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  
05 / 08 / 2025

Transaction ID : 30265621

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C. Magas, Susan, , ,**

Mailing Address 48 Brandy Ct

City  
GreensboroState  
NCZip Code  
27409-2331FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Not employed

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  
05 / 25 / 2025

Transaction ID : 30267680

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

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

2276.72

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 133 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Markovic, Robert, , ,**

Mailing Address 5506 Tuxedo Ter

City  
Los AngelesState  
CAZip Code  
90068-2454FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SelfOccupation (for Individual)  
Psychotherapist

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  
05 / 07 / 2025

Transaction ID : 30269239

Amount of Each Receipt this Period

300.00

☐ Memo Item

Non-Contribution Account

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

**B. marr, lisa, , ,**

Mailing Address 15 Roosevelt Ave

City  
LarchmontState  
NYZip Code  
10538-2912FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 15 / 2025

Transaction ID : 30266667

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**C. Maruca, Sam, , ,**

Mailing Address 3432 34th St NW

City  
WashingtonState  
DCZip Code  
20008-3229FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CovingtonOccupation (for Individual)  
Lawyer

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  
05 / 02 / 2025

Transaction ID : 30268517

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

500.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 134 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Mason, Patricia, , ,**

Mailing Address 11674 Arrowwood Cir

City  
HoustonState  
TXZip Code  
77063-1402FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employedOccupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 29 / 2025

Transaction ID : 30268137

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B. Mastin, Monica, , ,**

Mailing Address PO Box 97

City

The Sea Ranch

State

CA

Zip Code

95497-0097

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
VINOccupation (for Individual)  
Developer

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  
05 / 22 / 2025

Transaction ID : 30270170

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**C. Mattioli, Sharon, , ,**

Mailing Address 800 13th St

City

Bellingham

State

WA

Zip Code

98225-6219

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 18 / 2025

Transaction ID : 30266979

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

250.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 135 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A.** May, Lucia, , ,Mailing Address 603 Concord Ave  
Unit 200City  
CambridgeState  
MAZip Code  
02138-1198FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 29 / 2025

Transaction ID : 30268173

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B.** McBride, Rosanne, , ,

Mailing Address 3355 Longbow Ct

City  
Grand ForksState  
NDZip Code  
58203-2195FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 08 / 2025

Transaction ID : 30265606

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**C.** McCauley, Gorgis, , ,Mailing Address 444 Wedt Broad St  
Unit 625City  
Falls ChurchState  
VAZip Code  
22046FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 04 / 2025

Transaction ID : 30264648

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

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

250.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 136 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. McClure, Christine, , ,**

Mailing Address 3500 Hagen Rd

City  
NapaState  
CAZip Code  
94558-3862FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Queen of the Valley HospitalOccupation (for Individual)  
RN

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  
05 / 29 / 2025

Transaction ID : 30262915

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B. McCluskey, Martha, , ,**

Mailing Address 29 Munroe St

City  
NorthamptonState  
MAZip Code  
01060-4231FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
State University of New YorkOccupation (for Individual)  
Professor

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  
05 / 22 / 2025

Transaction ID : 30262909

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**C. McColgin, Leslie, , ,**

Mailing Address 6337 Shaw Rd

City  
MelberState  
KYZip Code  
42069-8834FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
selfOccupation (for Individual)  
speech-language pathologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

264.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 15 / 2025

Transaction ID : 30269608

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

175.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 137 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. McCormack, Jeanne, , ,**

Mailing Address PO Box 565

City  
Rio VistaState  
CAZip Code  
94571-0565FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self-employed

Occupation (for Individual)

Farmer/rancher

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  
05 / 01 / 2025

Transaction ID : 30264069

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**B. McCormick, Robert, , ,**

Mailing Address 1111 Clubside Dr

City  
WestlakeState  
OHZip Code  
44145-2811FEC 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

M M M / D D D / Y Y Y Y Y Y  
05 / 13 / 2025

Transaction ID : 30266326

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**C. McDonough, John E, , ,**

Mailing Address 37 Harris St

City  
BrooklineState  
MAZip Code  
02446-4903FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Harvard University

Occupation (for Individual)

Professor

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  
05 / 17 / 2025

Transaction ID : 30263618

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

250.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 138 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. McIver, Clara, , ,**

Mailing Address 411 Deerwood Ln N

City  
PlymouthState  
MNZip Code  
55441-6026FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 28 / 2025

Transaction ID : 30268046

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**B. McIver, Clara, , ,**

Mailing Address 411 Deerwood Ln N

City  
PlymouthState  
MNZip Code  
55441-6026FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 31 / 2025

Transaction ID : 30268281

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**C. Mckendrick, Nancy, , ,**

Mailing Address 17234 Buckingham Ave

City  
Beverly HillsState  
MIZip Code  
48025-3206FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

175.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 07 / 2025

Transaction ID : 30265452

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

75.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 139 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A.** Mckendrick, Nancy, , ,

Mailing Address 17234 Buckingham Ave

City  
Beverly HillsState  
MIZip Code  
48025-3206FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 11 / 2025

Transaction ID : 30265969

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B.** McKenzie, Sandra, , ,

Mailing Address 9 Burr Pl

City  
WeehawkenState  
NJZip Code  
07086-7018FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HazenOccupation (for Individual)  
Marketer

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  
05 / 03 / 2025

Transaction ID : 30268964

Amount of Each Receipt this Period

15.00

☐ Memo Item

Non-Contribution Account

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

**C.** McMahon, Laurene, , ,

Mailing Address 311 E 6th St

City  
HinsdaleState  
ILZip Code  
60521-4612FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employedOccupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 04 / 2025

Transaction ID : 30264680

Amount of Each Receipt this Period

200.00

☐ Memo Item

Non-Contribution Account

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

265.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 140 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. McMather, Gina, , ,**

Mailing Address 374 J Popper Way

City  
Port TownsendState  
WAZip Code  
98368-9273FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 15 / 2025

Transaction ID : 30266607

Amount of Each Receipt this Period

30.00

☐ Memo Item

Non-Contribution Account

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

**B. McMickle, Carolyn, , ,**

Mailing Address 10450 Dover Canyon Rd

City  
TempletonState  
CAZip Code  
93465-9539FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SelfOccupation (for Individual)  
Court reporter

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  
05 / 16 / 2025

Transaction ID : 30269625

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**C. McNevin, Susan, , ,**

Mailing Address 1584 Springfield Ave

City  
New ProvidenceState  
NJZip Code  
07974-1344FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 12 / 2025

Transaction ID : 30266002

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

230.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 141 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. McReynolds, Cynthia, , ,**

Mailing Address 1393 Tilton Rd

City  
SebastopolState  
CAZip Code  
95472-9420FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
selfOccupation (for Individual)  
psychotherapy

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  
05 / 13 / 2025

Transaction ID : 30269460

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**B. Melton, Mary Kay, , ,**Mailing Address 2801 Shadelands Dr  
Apt 323City  
Walnut CreekState  
CAZip Code  
94598-2554FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 03 / 2025

Transaction ID : 30264510

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C. Merrill, Cheryl, , ,**

Mailing Address 68720 Calle Tortosa

City  
Cathedral CityState  
CAZip Code  
92234-7119FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 22 / 2025

Transaction ID : 30267384

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

250.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 142 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Messing, Shelley, , ,**

Mailing Address 440 W End Ave

City  
New YorkState  
NYZip Code  
10024-5358FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
self-employedOccupation (for Individual)  
Psychotherapist

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  
05 / 28 / 2025

Transaction ID : 30264234

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B. Miller, Bernard, , ,**

Mailing Address 3939 Blackstone Ct

City  
HaywardState  
CAZip Code  
94542-1360FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 11 / 2025

Transaction ID : 30265964

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C. Miller, Cara, , ,**

Mailing Address 609 N Laurel Ave

City  
Los AngelesState  
CAZip Code  
90048-2320FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 13 / 2025

Transaction ID : 30266210

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

350.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 143 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A. Miller, Marli, , ,**

Mailing Address 2141 Harris St

City  
EugeneState  
ORZip Code  
97405-3037FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

U of oregon

Occupation (for Individual)

College teacher

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  
05 / 13 / 2025

Transaction ID : 30268350

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**B. Miller, Scott, , ,**Mailing Address 284 Lafayette St  
Apt 4CCity  
New YorkState  
NYZip Code  
10012-3361FEC 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  
05 / 18 / 2025

Transaction ID : 30267055

Amount of Each Receipt this Period

200.00

☐ Memo Item

Non-Contribution Account

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

**C. Mills, Robert, , ,**

Mailing Address 23880 Foxhollow Run

City  
New BostonState  
MIZip Code  
48164-8203FEC 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  
05 / 20 / 2025

Transaction ID : 30267217

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

400.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 144 OF 235  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Indivisible Action

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

**A.** Mishkin, Miramanni, , ,

Mailing Address 103 Main St

City  
BrownfieldState  
MEZip Code  
04010-4702FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
USMOccupation (for Individual)  
Lecturer

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  
05 / 03 / 2025

Transaction ID : 30270060

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**B.** Mishkin, Miramanni, , ,

Mailing Address 103 Main St

City  
BrownfieldState  
MEZip Code  
04010-4702FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
USMOccupation (for Individual)  
Lecturer

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  
05 / 27 / 2025

Transaction ID : 30267877

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**C.** Mishkin, Miramanni, , ,

Mailing Address 103 Main St

City  
BrownfieldState  
MEZip Code  
04010-4702FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
USMOccupation (for Individual)  
Lecturer

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  
05 / 29 / 2025

Transaction ID : 30270202

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

60.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 145 OF 235  
(check only one)

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

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)

Indivisible Action

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

**A. Mokolke, Susan, , ,**

Mailing Address 35 Vista Verde Way

City  
Portola ValleyState  
CAZip Code  
94028-8142FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Foundation for Shamanic StudiesOccupation (for Individual)  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 20 / 2025

Transaction ID : 30262779

Amount of Each Receipt this Period

150.00

☐ Memo Item

Non-Contribution Account

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

**B. Moreno, Sarah, , ,**

Mailing Address 1730 Caudor St

City  
EncinitasState  
CAZip Code  
92024-1238FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Orchid farmOccupation (for Individual)  
Sales

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  
05 / 27 / 2025

Transaction ID : 30268402

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C. Morgan, Elizabeth, , ,**

Mailing Address 38 Pineknoll Dr

City  
Lawrence TownshipState  
NJZip Code  
08648-3144FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 10 / 2025

Transaction ID : 30265820

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

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

225.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 146 OF 235  
(check only one)

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

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)

Indivisible Action

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

**A.** Morgan, Elizabeth, , ,

Mailing Address 38 Pineknoll Dr

City  
Lawrence TownshipState  
NJZip Code  
08648-3144FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 13 / 2025

Transaction ID : 30266407

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**B.** morgan-boucher, nancy, , ,

Mailing Address 2 Cedar Hill Rd

City  
RehobothState  
MAZip Code  
02769-2001FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 15 / 2025

Transaction ID : 30266708

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

**C.** morgan-boucher, nancy, , ,

Mailing Address 2 Cedar Hill Rd

City  
RehobothState  
MAZip Code  
02769-2001FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 25 / 2025

Transaction ID : 30267721

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

285.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 147 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Morris, Diane, , ,**

Mailing Address 13850 SW Stirrup St

City  
BeavertonState  
ORZip Code  
97008-7222FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 13 / 2025

Transaction ID : 30266390

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Moser, Nancy, , ,**

Mailing Address 1611 Two Springs Pl

City  
LouisvilleState  
KYZip Code  
40207-2377FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.92

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 11 / 2025

Transaction ID : 30265970

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MURRAY, JANET, , ,**Mailing Address 1735 Peachtree St NE  
Unit 615City  
AtlantaState  
GAZip Code  
30309-7029FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
USGOccupation (for Individual)  
Professor

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  
05 / 01 / 2025

Transaction ID : 30270208

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

100.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 148 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MURRAY, JANET, , ,**Mailing Address 1735 Peachtree St NE  
Unit 615City  
AtlantaState  
GAZip Code  
30309-7029FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
USGOccupation (for Individual)  
Professor

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  
05 / 27 / 2025

Transaction ID : 30270193

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Muth, Catherine, , ,**Mailing Address 4201 N Ocean Dr  
Apt 206City  
HollywoodState  
FLZip Code  
33019-4007FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
O. R. Colan AssociatesOccupation (for Individual)  
Right of way

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  
05 / 11 / 2025

Transaction ID : 30263258

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Muth, Catherine, , ,**Mailing Address 4201 N Ocean Dr  
Apt 206City  
HollywoodState  
FLZip Code  
33019-4007FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
O. R. Colan AssociatesOccupation (for Individual)  
Right of way

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  
05 / 23 / 2025

Transaction ID : 30263287

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

160.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 149 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Naughton, Molly, , ,**

Mailing Address 1160 Bryant St

City  
Palo AltoState  
CAZip Code  
94301-2714FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 07 / 2025

Transaction ID : 30265273

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Navas, Elizabeth, , ,**

Mailing Address 1315 Grand Ave

City  
San RafaelState  
CAZip Code  
94901-2232FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 20 / 2025

Transaction ID : 30267174

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Nayak, Mary, , ,**

Mailing Address 3813 Nelly Custis Dr

City  
ArlingtonState  
VAZip Code  
22207FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 14 / 2025

Transaction ID : 30266549

Amount of Each Receipt this Period

75.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

275.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 150 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input checked="" type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Naylor, Edwina, , ,**

Mailing Address 1302 Dauphin Ave

City  
WyomissingState  
PAZip Code  
19610-2114FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 13 / 2025

Transaction ID : 30266161

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Naylor, Gale, , ,**

Mailing Address 6650 Via San Blas

City  
PleasantonState  
CAZip Code  
94566-5768FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employedOccupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2025

Transaction ID : 30264392

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Naylor, Gale, , ,**

Mailing Address 6650 Via San Blas

City  
PleasantonState  
CAZip Code  
94566-5768FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employedOccupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 15 / 2025

Transaction ID : 30266701

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

135.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 151 OF 235

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input checked="" type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Naylor, Gale, , ,**

Mailing Address 6650 Via San Blas

City  
PleasantonState  
CAZip Code  
94566-5768FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employedOccupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 19 / 2025

Transaction ID : 30267125

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Neeley, Janet, , ,**

Mailing Address 4507 Valmonte Dr

City  
SacramentoState  
CAZip Code  
95864-3149FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

753.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 01 / 2025

Transaction ID : 30264265

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Neeley, Janet, , ,**

Mailing Address 4507 Valmonte Dr

City  
SacramentoState  
CAZip Code  
95864-3149FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

778.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 13 / 2025

Transaction ID : 30266132

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 152 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Neeley, Janet, , ,**

Mailing Address 4507 Valmonte Dr

City  
SacramentoState  
CAZip Code  
95864-3149FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

785.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 23 / 2025

Transaction ID : 30267513

Amount of Each Receipt this Period

7.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Neeley, Janet, , ,**

Mailing Address 4507 Valmonte Dr

City  
SacramentoState  
CAZip Code  
95864-3149FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

810.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 29 / 2025

Transaction ID : 30268123

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Neuzil, Georgeann, , ,**

Mailing Address 4369 Sandy Lane Rd

City  
ColumbusState  
OHZip Code  
43224-1940FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employedOccupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 08 / 2025

Transaction ID : 30265585

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

57.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 153 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Neuzil, Georgeann, , ,**

Mailing Address 4369 Sandy Lane Rd

City  
ColumbusState  
OHZip Code  
43224-1940FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employedOccupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 30 / 2025

Transaction ID : 30268208

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Newman, Mick, , ,**

Mailing Address 188 Ashley Woods Ln

City  
BluemontState  
VAZip Code  
20135-2070FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 07 / 2025

Transaction ID : 30265327

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Ng, Joshua, , ,**

Mailing Address 9 Seagrave Rd

City  
CambridgeState  
MAZip Code  
02140-1640FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 04 / 2025

Transaction ID : 30264573

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

175.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 154 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input checked="" type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A.** O Neill, Kathy, , ,

Mailing Address PO Box 471

City  
CrosswicksState  
NJZip Code  
08515-0471FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
White and WilliamsLLPOccupation (for Individual)  
attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 10 / 2025

Transaction ID : 30263338

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.** O'Day, Kathleen, , ,

Mailing Address 8105 N Haven Ave

City  
PortlandState  
ORZip Code  
97203-3417FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 17 / 2025

Transaction ID : 30266886

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.** OKane, Margaret, , ,

Mailing Address 1105 Woodside Pkwy

City  
Silver SpringState  
MDZip Code  
20910-1664FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NCQAOccupation (for Individual)  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 05 / 2025

Transaction ID : 30269170

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

200.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 155 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Omotunde, Betty, , ,**

Mailing Address 1704 Maring Way

City  
SacramentoState  
CAZip Code  
95835-1732FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Cascade Training CenterOccupation (for Individual)  
Instructor

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  
05 / 07 / 2025

Transaction ID : 30263171

Amount of Each Receipt this Period

75.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Oppenheim, Lisa, , ,**Mailing Address 600 S Dearborn St  
Apt 1116City  
ChicagoState  
ILZip Code  
60605-1833FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
cmhecOccupation (for Individual)  
educator

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  
05 / 21 / 2025

Transaction ID : 30269032

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Otter, Jenny, , ,**

Mailing Address PO Box 873

City  
MendocinoState  
CAZip Code  
95460-0873FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 01 / 2025

Transaction ID : 30264343

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

175.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 156 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input checked="" type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A.** page, carl, , ,

Mailing Address 5214 Diamond

City  
San FranciscoState  
CAZip Code  
94131FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
noneOccupation (for Individual)  
retired

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  
05 / 23 / 2025

Transaction ID : 30269803

Amount of Each Receipt this Period

200.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.** Parker, Linda, , ,

Mailing Address 2298 Minneola Rd

City  
ClearwaterState  
FLZip Code  
33764-4972FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 18 / 2025

Transaction ID : 30267052

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.** Parsons, Keith, , ,

Mailing Address 30 Bonnywick Dr

City  
HarrisburgState  
PAZip Code  
17111-4932FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 07 / 2025

Transaction ID : 30265403

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

325.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 157 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A.** Parsons, Lance, , ,

Mailing Address 18 Woodlane Rd

City  
Lawrence TownshipState  
NJZip Code  
08648-1052FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Princeton UniversityOccupation (for Individual)  
Research Software Engineer

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  
05 / 23 / 2025

Transaction ID : 30263432

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.** patrick, david, , ,

Mailing Address 243 W 116th St

City  
New YorkState  
NYZip Code  
10026-2427FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SelfOccupation (for Individual)  
Sales/Design

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  
05 / 02 / 2025

Transaction ID : 30269106

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.** Patrick, Donna, , ,

Mailing Address 8541 Valley Green Dr SE

City  
OlympiaState  
WAZip Code  
98513-9008FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 14 / 2025

Transaction ID : 30266494

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

200.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 158 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A.** Pearlman, Cheryl, , ,

Mailing Address 83 Louisa St

City  
BrooklynState  
NYZip Code  
11218-3013FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
selfOccupation (for Individual)  
social worker

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  
05 / 29 / 2025

Transaction ID : 30263948

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.** Pearlman, Cheryl, , ,

Mailing Address 83 Louisa St

City  
BrooklynState  
NYZip Code  
11218-3013FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
selfOccupation (for Individual)  
social worker

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  
05 / 30 / 2025

Transaction ID : 30270015

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.** Perkins, Randall, , ,

Mailing Address 531 River Rd

City  
Manchester CenterState  
VTZip Code  
05255-9242FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
selfOccupation (for Individual)  
book designer

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  
05 / 13 / 2025

Transaction ID : 30269488

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

135.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 159 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A.** perla, israel, , ,

Mailing Address PO Box 1014

City  
Oregon HouseState  
CAZip Code  
95962-1014FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SelfOccupation (for Individual)  
MFT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 07 / 2025

Transaction ID : 30269273

Amount of Each Receipt this Period

98.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.** Perla, Josie, , ,

Mailing Address PO Box 5

City  
AlbionState  
CAZip Code  
95410-0005FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 19 / 2025

Transaction ID : 30267095

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.** Perot, Kinny, , ,

Mailing Address PO Box 76A

City  
WarrenState  
VTZip Code  
05674-5076FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 26 / 2025

Transaction ID : 30267802

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

298.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 160 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Perrin, Marshall, , ,**

Mailing Address 426 S Patterson Park Ave

City  
BaltimoreState  
MDZip Code  
21231-2749FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Space Telescope Science InstituteOccupation (for Individual)  
Astronomer

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  
05 / 06 / 2025

Transaction ID : 30262729

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Pesch, Roland, , ,**

Mailing Address PO Box 142

City

The Sea Ranch

State

CA

Zip Code

95497-0142

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 31 / 2025

Transaction ID : 30268278

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Peterson, Florence, , ,**

Mailing Address 74 A Buckhorn Rd

City

Sequim

State

WA

Zip Code

98382-9509

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 09 / 2025

Transaction ID : 30265661

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

325.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 161 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Peterson, Florence, , ,**

Mailing Address 74 A Buckhorn Rd

City  
SequimState  
WAZip Code  
98382-9509FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
05 / 19 / 2025

Transaction ID : 30267104

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Peterson, Mark, , ,**

Mailing Address 13 Burnett Ave

City

South Hadley

State

MA

Zip Code

01075-1511

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Mount Holyoke CollegeOccupation (for Individual)  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
05 / 08 / 2025

Transaction ID : 30263329

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Pettit, Jennine, , ,**

Mailing Address 434 W 11th St

City

Loveland

State

CO

Zip Code

80537-4638

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
St. Vrain Valley SchoolsOccupation (for Individual)  
Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
05 / 29 / 2025

Transaction ID : 30263150

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

110.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 162 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Piatetsky, Gregory, , ,**

Mailing Address 226 Reservoir Rd

City  
Chestnut HillState  
MAZip Code  
02467-1427FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RetiredOccupation (for Individual)  
Data Scientist

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  
05 / 13 / 2025

Transaction ID : 30268767

Amount of Each Receipt this Period

99.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Pitkin, Anne, , ,**

Mailing Address 6809 Dayton Ave N

City  
SeattleState  
WAZip Code  
98103-5219FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 07 / 2025

Transaction ID : 30265141

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Pless, Naomi, , ,**

Mailing Address 83 Cattaraugus Dr

City  
RochesterState  
NYZip Code  
14623-5153FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
selfOccupation (for Individual)  
admin assist

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  
05 / 26 / 2025

Transaction ID : 30269890

Amount of Each Receipt this Period

75.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

224.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 163 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Potiker, Jody, , ,**

Mailing Address 26861 Via San Jose

City  
Mission ViejoState  
CAZip Code  
92691-1812FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1635.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2025

Transaction ID : 30264464

Amount of Each Receipt this Period

1635.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Power, Barbara, , ,**

Mailing Address 5520 Sherier PI NW

City  
WashingtonState  
DCZip Code  
20016-2564FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Fireside21Occupation (for Individual)  
Operations dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 14 / 2025

Transaction ID : 30268470

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Pride, Simon, , ,**

Mailing Address 123 Essex Ave

City  
BloomfieldState  
NJZip Code  
07003-2713FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NYUOccupation (for Individual)  
IT Expert

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 09 / 2025

Transaction ID : 30268446

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1760.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 164 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Pride, Simon, , ,**

Mailing Address 123 Essex Ave

City  
BloomfieldState  
NJZip Code  
07003-2713FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NYUOccupation (for Individual)  
IT Expert

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  
05 / 09 / 2025

Transaction ID : 30270108

Amount of Each Receipt this Period

40.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Prunier, Vivian, , ,**

Mailing Address 145 Old Ledge Rd

City  
PutneyState  
VTZip Code  
05346-9499FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
noneOccupation (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  
05 / 03 / 2025

Transaction ID : 30269126

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Rafferty, Moira, , ,**

Mailing Address 3214 Landon St

City  
LynchburgState  
VAZip Code  
24503-3112FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Medical Associates of Central VirginiaOccupation (for Individual)  
physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 10 / 2025

Transaction ID : 30262671

Amount of Each Receipt this Period

104.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

244.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 165 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input checked="" type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A.** Rapp, Bryna, , ,

Mailing Address 6819 Morrow Mill Rd

City  
Chapel HillState  
NCZip Code  
27516-7370FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
selfOccupation (for Individual)  
architect

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  
05 / 07 / 2025

Transaction ID : 30269233

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.** Rapp, Bryna, , ,

Mailing Address 6819 Morrow Mill Rd

City  
Chapel HillState  
NCZip Code  
27516-7370FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
selfOccupation (for Individual)  
architect

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  
05 / 13 / 2025

Transaction ID : 30269493

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.** Rayner, Rob, , ,

Mailing Address 18316 Bassano Ave

City  
PflugervilleState  
TXZip Code  
78660-2571FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 29 / 2025

Transaction ID : 30268113

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

175.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 166 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input checked="" type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Redmon, Sherrill, , ,**

Mailing Address PO Box 295

City  
ChesterfieldState  
MAZip Code  
01012-0295FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 05 / 2025

Transaction ID : 30264744

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Reed, C, , ,**

Mailing Address 18 Chattanooga St

City  
San FranciscoState  
CAZip Code  
94114-3025FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ShadowLight ProuctionsOccupation (for Individual)  
director

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  
05 / 04 / 2025

Transaction ID : 30263236

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Reid, LINDA, , ,**

Mailing Address 45 Grand View Ave

City  
San FranciscoState  
CAZip Code  
94114-2741FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Whwest IncOccupation (for Individual)  
Executive coach

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  
05 / 17 / 2025

Transaction ID : 30268478

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

650.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 167 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A.** Reimer, Ann, , ,

Mailing Address 23182 NE Devon Way

City  
RedmondState  
WAZip Code  
98053-5699FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 07 / 2025

Transaction ID : 30265172

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.** Reimer, Ann, , ,

Mailing Address 23182 NE Devon Way

City  
RedmondState  
WAZip Code  
98053-5699FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 11 / 2025

Transaction ID : 30265907

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.** Rerhrhaye, Adil, , ,

Mailing Address 702 ST

City  
MiamiState  
FLZip Code  
33134FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
World Fuel ServicesOccupation (for Individual)  
Corporate Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1525.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 22 / 2025

Transaction ID : 30263549

Amount of Each Receipt this Period

305.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

355.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 168 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Resnikoff, Rachel, , ,**

Mailing Address 26 Tunnel Rd

City  
BerkeleyState  
CAZip Code  
94705-2430FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
noneOccupation (for Individual)  
retired

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  
05 / 28 / 2025

Transaction ID : 30269960

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Richter, Jessica, , ,**

Mailing Address 101 Hilow Ct

City  
Los GatosState  
CAZip Code  
95032-4601FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
selfOccupation (for Individual)  
art teacher

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  
05 / 20 / 2025

Transaction ID : 30269717

Amount of Each Receipt this Period

15.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Roberts, Anne, , ,**

Mailing Address 747 Oglethorpe St NE

City  
WashingtonState  
DCZip Code  
20011-2734FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DC GovermtOccupation (for Individual)  
Timekeeper

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  
05 / 04 / 2025

Transaction ID : 30268421

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

65.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 169 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input checked="" type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Roberts, Anne, , ,**

Mailing Address 747 Oglethorpe St NE

City  
WashingtonState  
DCZip Code  
20011-2734FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DC GovernmtOccupation (for Individual)  
Timekeeper

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  
05 / 26 / 2025

Transaction ID : 30268499

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Roberts, Ilene, , ,**

Mailing Address 1024 Ouray Ave

City  
Grand JunctionState  
COZip Code  
81501-3332FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Retired

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  
05 / 10 / 2025

Transaction ID : 30265803

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Roberts, Ilene, , ,**

Mailing Address 1024 Ouray Ave

City  
Grand JunctionState  
COZip Code  
81501-3332FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

373.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 21 / 2025

Transaction ID : 30271028

Amount of Each Receipt this Period

123.20

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

198.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 170 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Robinson, Ervin, , ,**

Mailing Address 2155 Zion Rd

City  
LancasterState  
SCZip Code  
29720-8333FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 19 / 2025

Transaction ID : 30267082

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Rolfes, Carrie, , ,**

Mailing Address 456 Cabrillo Ter

City  
Corona Del MarState  
CAZip Code  
92625-2666FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Thomas J Rolfes DDS IncOccupation (for Individual)  
Accountant

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  
05 / 07 / 2025

Transaction ID : 30263174

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Rose, C G, , ,**

Mailing Address 26 Shiprock Est

City  
North HamptonState  
NHZip Code  
03862-2337FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 13 / 2025

Transaction ID : 30266186

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

400.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 171 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Rose, Christopher, , ,**

Mailing Address 138 Governor St

City  
ProvidenceState  
RIZip Code  
02906-3095FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Brown UniversityOccupation (for Individual)  
Professor

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  
05 / 04 / 2025

Transaction ID : 30263762

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Rosen, Joel, , ,**

Mailing Address 142 Main St

City  
NorthamptonState  
MAZip Code  
01060-3160FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SelfOccupation (for Individual)  
Psychiatrist

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  
05 / 08 / 2025

Transaction ID : 30269333

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Rosen, Joel, , ,**

Mailing Address 142 Main St

City  
NorthamptonState  
MAZip Code  
01060-3160FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SelfOccupation (for Individual)  
Psychiatrist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

695.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 14 / 2025

Transaction ID : 30269585

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

145.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 172 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input checked="" type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A.** Rosen, Joel, , ,

Mailing Address 142 Main St

City  
NorthamptonState  
MAZip Code  
01060-3160FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SelfOccupation (for Individual)  
Psychiatrist

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  
05 / 17 / 2025

Transaction ID : 30269654

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.** Rosen, Joel, , ,

Mailing Address 142 Main St

City  
NorthamptonState  
MAZip Code  
01060-3160FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SelfOccupation (for Individual)  
Psychiatrist

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  
05 / 21 / 2025

Transaction ID : 30269740

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.** Rosen, Joel, , ,

Mailing Address 142 Main St

City  
NorthamptonState  
MAZip Code  
01060-3160FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SelfOccupation (for Individual)  
Psychiatrist

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  
05 / 21 / 2025

Transaction ID : 30269765

Amount of Each Receipt this Period

5.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

80.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 173 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Rosen, Joel, , ,**

Mailing Address 142 Main St

City  
NorthamptonState  
MAZip Code  
01060-3160FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SelfOccupation (for Individual)  
Psychiatrist

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  
05 / 24 / 2025

Transaction ID : 30269834

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Rubin, Sarah, , ,**

Mailing Address 1923 S Desplaines St

City  
ChicagoState  
ILZip Code  
60616-1055FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
City of ChicagoOccupation (for Individual)  
Environmental engineer

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  
05 / 25 / 2025

Transaction ID : 30263935

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Rushton, Barbara, , ,**Mailing Address 1215 Anchors Way Dr  
Spc 38City  
VenturaState  
CAZip Code  
93001-5212FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 05 / 2025

Transaction ID : 30264788

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

125.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 174 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A.** Russell, Ann, , ,

Mailing Address 5812 Chestnut Ridge Dr

City  
CincinnatiState  
OHZip Code  
45230-2501FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 21 / 2025

Transaction ID : 30267301

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.** Rustad, Miriam, , ,

Mailing Address 20152 Midland Ln

City  
Huntington BeachState  
CAZip Code  
92646-4917FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 29 / 2025

Transaction ID : 30268169

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.** Rysdahl, Dennis, , ,

Mailing Address 20 TEMPERANCE LANDING Rd

City  
SchroederState  
MNZip Code  
55613FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Tofte Management LLCOccupation (for Individual)  
Resort Manager

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  
05 / 20 / 2025

Transaction ID : 30263421

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

250.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 175 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Saddler, Harry, , ,**

Mailing Address 2444 Prince St

City  
BerkeleyState  
CAZip Code  
94705-2023FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 22 / 2025

Transaction ID : 30267369

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Saffran, Richard, , ,**

Mailing Address 334 Hemlock Cir

City  
LincolnState  
MAZip Code  
01773-4925FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BoseOccupation (for Individual)  
Engineer

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  
05 / 16 / 2025

Transaction ID : 30269633

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Sagalaev, Ivan, , ,**

Mailing Address 19612 NE 44th Pl

City  
SammamishState  
WAZip Code  
98074-4654FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 20 / 2025

Transaction ID : 30267205

Amount of Each Receipt this Period

150.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

250.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 176 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Sarja, Jane, , ,**Mailing Address 227 Twin Lakes Rd  
Apt BCity  
North BranfordState  
CTZip Code  
06471-1295FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 19 / 2025

Transaction ID : 30267064

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Savage, Julia, , ,**

Mailing Address 17036 Pennington Dr

City  
HuntersvilleState  
NCZip Code  
28078-8082FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NoneOccupation (for Individual)  
Real Estate Broker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 07 / 2025

Transaction ID : 30269242

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Savage, Julia, , ,**

Mailing Address 17036 Pennington Dr

City  
HuntersvilleState  
NCZip Code  
28078-8082FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NoneOccupation (for Individual)  
Real Estate Broker

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  
05 / 13 / 2025

Transaction ID : 30269508

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

150.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 177 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A.** Sayre, Daniel, , ,

Mailing Address 208 Burch Dr

City  
CoraopolisState  
PAZip Code  
15108-3166FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HVHSOccupation (for Individual)  
RRT

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  
05 / 18 / 2025

Transaction ID : 30269668

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.** Schaitberger, Sharli, L., ,

Mailing Address 2356 W Via Rialto Ave

City  
MesaState  
AZZip Code  
85202-5530FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 15 / 2025

Transaction ID : 30266649

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.** Schatz, Willie, , ,

Mailing Address 1855 California St NW

City  
WashingtonState  
DCZip Code  
20009-1808FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 03 / 2025

Transaction ID : 30264491

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

85.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 178 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A.** Schatz, Willie, , ,

Mailing Address 1855 California St NW

City  
WashingtonState  
DCZip Code  
20009-1808FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 20 / 2025

Transaction ID : 30267225

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.** Schlosser, Dorothea, , ,

Mailing Address 38 Tall Timber Ln

City  
Basking RidgeState  
NJZip Code  
07920-3215FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 18 / 2025

Transaction ID : 30267013

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.** Schmeichel, Andrea, , ,

Mailing Address 204 NW 22nd Pl

City  
PortlandState  
ORZip Code  
97210-3512FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Nordic ConsultingOccupation (for Individual)  
Healthcare IT

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  
05 / 05 / 2025

Transaction ID : 30263669

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

225.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 179 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A.** Schmid, Amy, , ,

Mailing Address 19025 Twilight Trl

City  
Eden PrairieState  
MNZip Code  
55346-4047FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Schmid ConsultingOccupation (for Individual)  
Affordable housing business owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.27

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 14 / 2025

Transaction ID : 30263713

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.** Schnaper, Gordon, , ,

Mailing Address 1058 Chandler St

City  
TewksburyState  
MAZip Code  
01876-3714FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 16 / 2025

Transaction ID : 30266801

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.** Schramm, Jenifer, , ,

Mailing Address 2724 NW Thurman St

City  
PortlandState  
ORZip Code  
97210-2355FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 23 / 2025

Transaction ID : 30267546

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

125.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 180 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input checked="" type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Schuessler, Guy, , ,**

Mailing Address 370 Fort Washington Ave

City  
New YorkState  
NYZip Code  
10033-6801FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
self-employedOccupation (for Individual)  
actor

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  
05 / 17 / 2025

Transaction ID : 30264186

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Schwartz, Joseph, , ,**

Mailing Address 1105 Massachusetts Ave

City  
CambridgeState  
MAZip Code  
02138-5220FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SelfOccupation (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  
05 / 06 / 2025

Transaction ID : 30269216

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Schwartzman, Deborah, , ,**

Mailing Address 636 Burnham Rd

City  
PhiladelphiaState  
PAZip Code  
19119-3510FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 11 / 2025

Transaction ID : 30265939

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

85.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 181 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Scott, Dorothy, , ,**

Mailing Address 1647 Church St

City  
EvanstonState  
ILZip Code  
60201-3513FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Sg2Occupation (for Individual)  
writer

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  
05 / 06 / 2025

Transaction ID : 30270075

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Scott, Dorothy, , ,**

Mailing Address 1647 Church St

City  
EvanstonState  
ILZip Code  
60201-3513FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Sg2Occupation (for Individual)  
writer

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  
05 / 17 / 2025

Transaction ID : 30270144

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Scow, Kate, , ,**

Mailing Address 760 N Campus Way

City  
DavisState  
CAZip Code  
95616-3519FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 15 / 2025

Transaction ID : 30266616

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 182 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Sears, Christopher, , ,**

Mailing Address 18 Holly Ln

City  
Lawrence TownshipState  
NJZip Code  
08648-1040FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Syncro MedicalOccupation (for Individual)  
Engineer

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  
05 / 05 / 2025

Transaction ID : 30263970

Amount of Each Receipt this Period

60.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Shafer, James, , ,**

Mailing Address 1085 Trachsville Hill Rd

City  
KunkletownState  
PAZip Code  
18058-2547FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Power Flow Systems Inc.Occupation (for Individual)  
Sales Rep

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  
05 / 17 / 2025

Transaction ID : 30263200

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Sheehan, Caroline, , ,**

Mailing Address 105 Mcdonald Ave

City  
BrooklynState  
NYZip Code  
11218-1007FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NYC H+HOccupation (for Individual)  
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  
05 / 16 / 2025

Transaction ID : 30268787

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

160.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 183 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Shelander, Susan, , ,**

Mailing Address 6147 W Beard Rd

City  
PerryState  
MIZip Code  
48872-9145FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 18 / 2025

Transaction ID : 30267017

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Shepard Quigley, Kathleen, , ,**

Mailing Address 2562 Glasgow Dr

City  
CarlsbadState  
CAZip Code  
92010-5602FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 17 / 2025

Transaction ID : 30266864

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Shillinglaw, Brian, , ,**

Mailing Address PO Box 9183

City  
BerkeleyState  
CAZip Code  
94709-0183FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Brian ShillinglawOccupation (for Individual)  
Consulting

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  
05 / 20 / 2025

Transaction ID : 30263724

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

250.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 184 OF 235

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Shoenberger, Linda, , ,**

Mailing Address 1075 Joaquin Miller Dr

City  
RenoState  
NVZip Code  
89509-1954FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Sprenger Property Management Inc.Occupation (for Individual)  
Property manager

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  
05 / 26 / 2025

Transaction ID : 30262742

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Siebel, Brian, , ,**Mailing Address 5300 Holmes Run Pkwy  
Apt 1207City  
AlexandriaState  
VAZip Code  
22304-2844FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SelfOccupation (for Individual)  
Realtor

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  
05 / 27 / 2025

Transaction ID : 30269916

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Singer, Stephanie, , ,**

Mailing Address 218 Nevada St

City  
Santa CruzState  
CAZip Code  
95060-6523FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
retiredOccupation (for Individual)  
retired

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  
05 / 15 / 2025

Transaction ID : 30268778

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

150.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 185 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Slabach, Patricia, , ,**

Mailing Address 8015 N Denny Rd

City  
BloomingtonState  
INZip Code  
47404-9411FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 08 / 2025

Transaction ID : 30265539

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Smith, Diana, , ,**

Mailing Address 2 Fox Meadow Ln

City  
WestonState  
MAZip Code  
02493-1230FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Actionsmith IncOccupation (for Individual)  
Consultant

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  
05 / 29 / 2025

Transaction ID : 30263949

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Smith, Sandra, , ,**

Mailing Address 9702 Nadine St

City  
Temple CityState  
CAZip Code  
91780-3222FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 13 / 2025

Transaction ID : 30266386

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

200.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 186 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Smith, Stephanie, , ,**

Mailing Address 5753 Highway 85 N

City  
CrestviewState  
FLZip Code  
32536-9365FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employedOccupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 15 / 2025

Transaction ID : 30266656

Amount of Each Receipt this Period

40.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Smullin, Alix, , ,**

Mailing Address 22 Woodbine Ave

City  
SwampscottState  
MAZip Code  
01907-2658FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 03 / 2025

Transaction ID : 30264544

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Sowder, Judith, , ,**Mailing Address 849 Coast Blvd  
# 13City  
La JollaState  
CAZip Code  
92037-4223FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 17 / 2025

Transaction ID : 30266928

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

140.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 187 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Spain, Daphne, , ,**

Mailing Address 640 Explorers Rd

City  
CharlottesvilleState  
VAZip Code  
22911-8440FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 11 / 2025

Transaction ID : 30265962

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Speed Perri, Mary, , ,**

Mailing Address 15 Crinkle Ct

City  
NorthportState  
NYZip Code  
11768-1856FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 10 / 2025

Transaction ID : 30265765

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Steih, Gail, , ,**

Mailing Address 1115 Vesper Rd

City  
Ann ArborState  
MIZip Code  
48103-3018FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 04 / 2025

Transaction ID : 30264686

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 188 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Stewart, Julie, , ,**Mailing Address 1919 Chestnut St  
Apt 2717City  
PhiladelphiaState  
PAZip Code  
19103-3450FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 16 / 2025

Transaction ID : 30266829

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. stewart, sandra, , ,**

Mailing Address 2827 NE Irving Street 2827 Northea

City  
PortlandState  
ORZip Code  
97232FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 03 / 2025

Transaction ID : 30264514

Amount of Each Receipt this Period

75.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Stillings, Lynn, , ,**

Mailing Address 800 Antler Point Ln

City  
SiltState  
COZip Code  
81652-8505FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 04 / 2025

Transaction ID : 30264622

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

225.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 189 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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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)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Stokes, Jane, , ,**

Mailing Address 250 Meadow Rd

City  
Santa CruzState  
CAZip Code  
95060-2040FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Firelight FoundationOccupation (for Individual)  
Finance and Administration Manager

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  
05 / 06 / 2025

Transaction ID : 30263381

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Stone, Chris, , ,**

Mailing Address 25 Cummings Rd

City  
MontpelierState  
VTZip Code  
05602-9440FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 09 / 2025

Transaction ID : 30265687

Amount of Each Receipt this Period

40.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Stone, Danny, , ,**

Mailing Address 629 Lincoln Ave

City  
CarbondaleState  
COZip Code  
81623-1726FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RFSDOccupation (for Individual)  
Teacher

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  
05 / 30 / 2025

Transaction ID : 30270009

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

140.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 190 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input checked="" type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Storbeck, John, , ,**

Mailing Address 2933 Tillicum Beach Dr

City  
Camano IslandState  
WAZip Code  
98282-7061FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AvanadeOccupation (for Individual)  
IT Consultant

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  
05 / 14 / 2025

Transaction ID : 30268770

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Strahler, Alan, , ,**Mailing Address 1 Charles St S  
Unit 1612City  
BostonState  
MAZip Code  
02116-5458FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employedOccupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 04 / 2025

Transaction ID : 30264617

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Strahler, Alan, , ,**Mailing Address 1 Charles St S  
Unit 1612City  
BostonState  
MAZip Code  
02116-5458FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employedOccupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 23 / 2025

Transaction ID : 30267551

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

250.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 191 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Stuart, Andrew, , ,**Mailing Address 7140 Selby Rd  
Lot 76City  
AthensState  
OHZip Code  
45701-9292FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Ohio UniversityOccupation (for Individual)  
Librarian

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  
05 / 19 / 2025

Transaction ID : 30263910

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Subiza, Dolores, , ,**

Mailing Address 3253 Sutton PI NW

City  
WashingtonState  
DCZip Code  
20016-7531FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 08 / 2025

Transaction ID : 30265607

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Sullivan, Janet, , ,**

Mailing Address 2617 NE 154th Ct

City  
VancouverState  
WAZip Code  
98684-7895FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
noneOccupation (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  
05 / 14 / 2025

Transaction ID : 30269557

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

150.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 192 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Sullivan, Seamus, , ,**Mailing Address 100 Warren St  
Apt 1814City  
Jersey CityState  
NJZip Code  
07302-6416FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Seamus SullivanOccupation (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  
05 / 14 / 2025

Transaction ID : 30263894

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Suntum, EvaMarie, , ,**

Mailing Address 113 Environs Rd

City  
SterlingState  
VAZip Code  
20165-5803FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
The Impact Group Inc.Occupation (for Individual)  
Director

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  
05 / 19 / 2025

Transaction ID : 30263354

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Sutherland, Cliff, , ,**

Mailing Address 1527 Summit View Dr

City  
Holts SummitState  
MOZip Code  
65043-2009FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 15 / 2025

Transaction ID : 30266626

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

225.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 193 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input checked="" type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A.** Sutton, Adam, , ,

Mailing Address 120 Elm St

City  
BelmontState  
MAZip Code  
02478-3735FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SelfOccupation (for Individual)  
Management Consultant

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  
05 / 11 / 2025

Transaction ID : 30269427

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.** Sutton, Thomas, , ,

Mailing Address 7 W Amherst Rd

City  
Bala CynwydState  
PAZip Code  
19004-2503FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
selfOccupation (for Individual)  
attorney

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  
05 / 13 / 2025

Transaction ID : 30269479

Amount of Each Receipt this Period

125.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.** Swords, Diane, , ,

Mailing Address 144 Kensington Pl

City  
SyracuseState  
NYZip Code  
13210-3010FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Syracuse UniversityOccupation (for Individual)  
Part Time staff

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  
05 / 25 / 2025

Transaction ID : 30263552

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

225.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 194 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input checked="" type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Ta, Jacqueline, , ,**

Mailing Address 7044 E Ohio Dr

City  
DenverState  
COZip Code  
80224-1535FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
myStrengthOccupation (for Individual)  
Developer

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  
05 / 23 / 2025

Transaction ID : 30268488

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Tadolini, Antoinette, , ,**

Mailing Address 10977 Snow Cloud Trl

City  
LittletonState  
COZip Code  
80125-9210FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 14 / 2025

Transaction ID : 30266471

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Taggart, Stewart, , ,**

Mailing Address 85 No Junk Mail

City  
HalfwayState  
ORZip Code  
97834FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 02 / 2025

Transaction ID : 30264456

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

600.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 195 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A.** Taliesin, Ceridwen, , ,

Mailing Address 205 Deer Park Ave

City

Temple Terrace

State

FL

Zip Code

33617-4117

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  
05 / 07 / 2025

Transaction ID : 30265133

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.** Taliesin, Ceridwen, , ,

Mailing Address 205 Deer Park Ave

City

Temple Terrace

State

FL

Zip Code

33617-4117

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  
05 / 29 / 2025

Transaction ID : 30268122

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.** Tamres, Shelley, , ,

Mailing Address 108 Willow Pl

City

Sterling

State

VA

Zip Code

20164-1625

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

M M M / D D D / Y Y Y Y Y Y  
05 / 13 / 2025

Transaction ID : 30266228

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

150.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 196 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Tavis, Anna, , ,**

Mailing Address 133 8th Ave

City  
BrooklynState  
NYZip Code  
11215-1770FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NYUOccupation (for Individual)  
Professor

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  
05 / 12 / 2025

Transaction ID : 30270118

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Tavis, Anna, , ,**

Mailing Address 133 8th Ave

City  
BrooklynState  
NYZip Code  
11215-1770FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NYUOccupation (for Individual)  
Professor

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  
05 / 19 / 2025

Transaction ID : 30270152

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Taylor, Claudia, , ,**

Mailing Address 28036 Sea Lane Dr

City  
MalibuState  
CAZip Code  
90265-4325FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SelfOccupation (for Individual)  
Artist

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  
05 / 30 / 2025

Transaction ID : 30270019

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

125.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 197 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A.** Taylor, Harry, , ,

Mailing Address 1901 Brandon Cir

City  
CharlotteState  
NCZip Code  
28211-1612FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self-EmployedOccupation (for Individual)  
Real Estate

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  
05 / 30 / 2025

Transaction ID : 30271048

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.** Taylor, Leslie, , ,

Mailing Address 144 Marietta Dr

City

San Francisco

State

CA

Zip Code

94127-1842

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
State of CaliforniaOccupation (for Individual)  
Staff Information Systems 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  
05 / 07 / 2025

Transaction ID : 30263488

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.** Taylor, Leslie, , ,

Mailing Address 144 Marietta Dr

City

San Francisco

State

CA

Zip Code

94127-1842

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
State of CaliforniaOccupation (for Individual)  
Staff Information Systems Analyst

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  
05 / 26 / 2025

Transaction ID : 30263555

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

325.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 198 OF 235

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A.** Taylor, Nancy, , ,

Mailing Address 20527 Simon Ct

City  
WalnutState  
CAZip Code  
91789-1948FEC 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  
05 / 07 / 2025

Transaction ID : 30265418

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.** Taylor, Nancy, , ,

Mailing Address 20527 Simon Ct

City  
WalnutState  
CAZip Code  
91789-1948FEC 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  
05 / 13 / 2025

Transaction ID : 30266139

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.** Thomas, Karen, , ,

Mailing Address 233 Grant St

City  
HealdsburgState  
CAZip Code  
95448-3934FEC 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

M M M / D D D / Y Y Y Y Y Y  
05 / 13 / 2025

Transaction ID : 30266424

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

175.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 199 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A.** Thomas, Robert, , ,

Mailing Address 230 Lynx Ct

City  
FremontState  
CAZip Code  
94539-6051FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

704.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 13 / 2025

Transaction ID : 30266288

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.** Thomas, Robert, , ,

Mailing Address 230 Lynx Ct

City  
FremontState  
CAZip Code  
94539-6051FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 15 / 2025

Transaction ID : 30266673

Amount of Each Receipt this Period

76.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.** Thompson, Martha, , ,

Mailing Address 3007 Stanford Rd

City  
Fort CollinsState  
COZip Code  
80525-2520FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employedOccupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 06 / 2025

Transaction ID : 30264872

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

201.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 200 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Thompson, Martha, , ,**

Mailing Address 3007 Stanford Rd

City  
Fort CollinsState  
COZip Code  
80525-2520FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employedOccupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 08 / 2025

Transaction ID : 30265592

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Tieman, Michael, , ,**

Mailing Address 15724 SW Flagstone Dr

City  
BeavertonState  
ORZip Code  
97007-6672FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 28 / 2025

Transaction ID : 30268069

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Tobias, Andrew, , ,**

Mailing Address 146 Central Park W

City  
New YorkState  
NYZip Code  
10023-6297FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
selfOccupation (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  
05 / 12 / 2025

Transaction ID : 30269450

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

160.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 201 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A.** tobias, stephen, , ,

Mailing Address 5655 Broadway

City  
OaklandState  
CAZip Code  
94618-1522FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 02 / 2025

Transaction ID : 30264415

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.** Toll, Richard, , ,Mailing Address 14169 SE River Rd  
# 303BHCity  
PortlandState  
ORZip Code  
97267-1103FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 18 / 2025

Transaction ID : 30267020

Amount of Each Receipt this Period

150.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.** Tolliver, Andy, , ,

Mailing Address 257 Farm Hill Rd

City  
MorrisvilleState  
VTZip Code  
05661-9325FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SelfOccupation (for Individual)  
WoodWorker

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  
05 / 22 / 2025

Transaction ID : 30269777

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 202 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input checked="" type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Topik, Steven, , ,**

Mailing Address 7 Dickens Ct

City  
IrvineState  
CAZip Code  
92617-4028FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

U. Calif. Irvine

Occupation (for Individual)

Teacher

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  
05 / 23 / 2025

Transaction ID : 30263828

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Tracy, Sandy, , ,**

Mailing Address 829 Greensview Ct NW

City

Hutchinson

State

MN

Zip Code

55350-4395

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  
05 / 03 / 2025

Transaction ID : 30264504

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Trevino, Roel, , ,**

Mailing Address 11617 Hollister Dr

City

Austin

State

TX

Zip Code

78739-1915

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self

Occupation (for Individual)

Lawyer

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  
05 / 21 / 2025

Transaction ID : 30269753

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 203 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Trufelman, Lloyd, , ,**

Mailing Address 57 Edgemont Rd

City  
KatonahState  
NYZip Code  
10536-1529FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 06 / 2025

Transaction ID : 30264984

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Tucker, Paul, , ,**

Mailing Address 9600 NE 5th St

City  
VancouverState  
WAZip Code  
98664-3309FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 23 / 2025

Transaction ID : 30267537

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Tucker, Paul, , ,**

Mailing Address 9600 NE 5th St

City  
VancouverState  
WAZip Code  
98664-3309FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 30 / 2025

Transaction ID : 30268203

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

150.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 204 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A.** van den Bent, Jerre, , ,

Mailing Address 1630 Junior Dr

City  
DallasState  
TXZip Code  
75208-2424FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
THERAPY 2000Occupation (for Individual)  
Physical Therapist

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  
05 / 09 / 2025

Transaction ID : 30265733

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.** van Rijn, Kathleen, , ,

Mailing Address 333 E 43rd St

City  
New YorkState  
NYZip Code  
10017-4831FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 24 / 2025

Transaction ID : 30267638

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.** Vanderzon, Maura, , ,

Mailing Address 4902 Falstone Ave

City  
Chevy ChaseState  
MDZip Code  
20815-5540FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employedOccupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 10 / 2025

Transaction ID : 30265843

Amount of Each Receipt this Period

63.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1163.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 205 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VAUGHAN, Jerry, , ,**

Mailing Address 11350 Woodstock Rd

City  
RoswellState  
GAZip Code  
30075-7541FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 25 / 2025

Transaction ID : 30267708

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Vise, Benjamin, , ,**

Mailing Address 2012 Stagecoach Vlg

City  
Little RockState  
ARZip Code  
72210-4776FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 17 / 2025

Transaction ID : 30266897

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Vogelmann, Michael, , ,**

Mailing Address 112 E Linden Ave

City  
CollingswoodState  
NJZip Code  
08108-2026FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JSW Wine and SpiritsOccupation (for Individual)  
Receiving Clerk

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2025

Transaction ID : 30263375

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

250.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 206 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A.** von Kampen, Erika, , ,Mailing Address 3608 SE 40th Ave  
Apt 1City  
PortlandState  
ORZip Code  
97202-1769FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Best Buy

Occupation (for Individual)

Computer security

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  
05 / 07 / 2025

Transaction ID : 30268610

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.** Wagner, Andrew, , ,

Mailing Address 7 Woodhollow Rd

City

Princeton Junction

State

NJ

Zip Code

08550-4907

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Oscar Health

Occupation (for Individual)

Engineer

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  
05 / 16 / 2025

Transaction ID : 30266757

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.** Wagner, Kathryn, , ,

Mailing Address 566 S Bryan St

City

Elmhurst

State

IL

Zip Code

60126-4341

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Freeze Dry Ingredients

Occupation (for Individual)

Administration Manager

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  
05 / 06 / 2025

Transaction ID : 30263243

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 207 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Waldman, DP, , ,**Mailing Address 200 S Main St  
Ste Pm 130City  
SebastopolState  
CAZip Code  
95472-4299FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self-employedOccupation (for Individual)  
Professional Coach

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 11 / 2025

Transaction ID : 30264152

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Walker, Louise, , ,**

Mailing Address 1229 Deodara St

City  
DavisState  
CAZip Code  
95618-5000FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SelfOccupation (for Individual)  
Psychotherapist

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  
05 / 26 / 2025

Transaction ID : 30269895

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Wallace, John, , ,**

Mailing Address 831 Ashbury St

City  
San FranciscoState  
CAZip Code  
94117-4418FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 20 / 2025

Transaction ID : 30267227

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

250.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 208 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Walsh, Jeanne, , ,**

Mailing Address 934 Schoel Dr

City  
DecaturState  
GAZip Code  
30033-4917FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 21 / 2025

Transaction ID : 30267330

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Walters, Gayle, , ,**

Mailing Address 4214 N Charles St

City  
BaltimoreState  
MDZip Code  
21218-1038FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 09 / 2025

Transaction ID : 30265746

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Ware, Sharon, , ,**

Mailing Address 30 Sycamore Rd

City  
West HartfordState  
CTZip Code  
06117-2834FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
University of Saint JosephOccupation (for Individual)  
Educator

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  
05 / 03 / 2025

Transaction ID : 30262976

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

175.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 209 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input checked="" type="checkbox"/> 17			

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)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A.** Ware, Sharon, , ,

Mailing Address 30 Sycamore Rd

City  
West HartfordState  
CTZip Code  
06117-2834FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
University of Saint JosephOccupation (for Individual)  
Educator

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  
05 / 13 / 2025

Transaction ID : 30263000

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.** Ware, Sharon, , ,

Mailing Address 30 Sycamore Rd

City  
West HartfordState  
CTZip Code  
06117-2834FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
University of Saint JosephOccupation (for Individual)  
Educator

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  
05 / 17 / 2025

Transaction ID : 30263005

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.** Warner, Janet, , ,

Mailing Address PO Box 699

City  
Angel FireState  
NMZip Code  
87710-0699FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
selfOccupation (for Individual)  
self employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 08 / 2025

Transaction ID : 30269351

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

70.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 210 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Warner, Janet, , ,**

Mailing Address PO Box 699

City  
Angel FireState  
NMZip Code  
87710-0699FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
selfOccupation (for Individual)  
self 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  
05 / 12 / 2025

Transaction ID : 30268755

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Weaver, Katherine, , ,**

Mailing Address 514 Stickney Mountain Pl

City  
Gold BarState  
WAZip Code  
98251-9463FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Monroe co-opOccupation (for Individual)  
Sales associate

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  
05 / 17 / 2025

Transaction ID : 3026872

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Weavingearth, Bonita, , ,**

Mailing Address 2254 Midvale Ave

City  
Los AngelesState  
CAZip Code  
90064-2013FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 05 / 2025

Transaction ID : 30264759

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

225.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 211 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Weiner, Robert, , ,**

Mailing Address 59 1/2 Manchester St

City  
San FranciscoState  
CAZip Code  
94110-5224FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Robert L. Weiner Consulting

Occupation (for Individual)

Strategic Technology Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 29 / 2025

Transaction ID : 30262970

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Weisiger, Christine, , ,**

Mailing Address 10 Landfall

City  
FalmouthState  
MAZip Code  
02540-1658FEC 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

M M / D D / Y Y Y Y Y Y  
05 / 08 / 2025

Transaction ID : 30265560

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Wells, Margaret, , ,**

Mailing Address 19320 N Hatch Rd

City  
ColbertState  
WAZip Code  
99005-9100FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

BASD

Occupation (for Individual)

teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 04 / 2025

Transaction ID : 30269153

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

175.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 212 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input checked="" type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Wells, Margaret, , ,**

Mailing Address 19320 N Hatch Rd

City  
ColbertState  
WAZip Code  
99005-9100FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BASDOccupation (for Individual)  
teacher

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  
05 / 11 / 2025

Transaction ID : 30269413

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Wermlinger, Francesca, , ,**

Mailing Address 3213 California Ave SW

City  
SeattleState  
WAZip Code  
98116-3304FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
StarbucksOccupation (for Individual)  
vice president

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  
05 / 07 / 2025

Transaction ID : 30268531

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Wermlinger, Francesca, , ,**

Mailing Address 3213 California Ave SW

City  
SeattleState  
WAZip Code  
98116-3304FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
StarbucksOccupation (for Individual)  
vice president

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  
05 / 13 / 2025

Transaction ID : 30268556

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

125.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 213 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Wessen Chang, Barbara, , ,**

Mailing Address 2901 Sierra Blvd

City  
SacramentoState  
CAZip Code  
95864-4960FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 25 / 2025

Transaction ID : 30267682

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Whatley, Kathleen, , ,**

Mailing Address 2798 Jackson St

City  
Saint PaulState  
MNZip Code  
55117-1301FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 06 / 2025

Transaction ID : 30264953

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Whelan, Gerald, , ,**

Mailing Address 1305 Statesbury Ave

City  
WyndmoorState  
PAZip Code  
19038-7441FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 22 / 2025

Transaction ID : 30267450

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

200.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 214 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Whitaker, William, , ,**

Mailing Address 12 Lake Crest Dr

City  
MilfordState  
DEZip Code  
19963-9659FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Gap InternationalOccupation (for Individual)  
Management Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 09 / 2025

Transaction ID : 30263685

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. White, Gregory, , ,**

Mailing Address 5626 N State Road 32

City  
PeoaState  
UTZip Code  
84061-9704FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 13 / 2025

Transaction ID : 30266254

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. White, Gregory, , ,**

Mailing Address 5626 N State Road 32

City  
PeoaState  
UTZip Code  
84061-9704FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 13 / 2025

Transaction ID : 30266305

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

450.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 215 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Whittaker, Joan, , ,**

Mailing Address 6334 Sahalee Ct

City  
ClintonState  
WAZip Code  
98236-9125FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 02 / 2025

Transaction ID : 30264433

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Whittaker, Joan, , ,**

Mailing Address 6334 Sahalee Ct

City  
ClintonState  
WAZip Code  
98236-9125FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 18 / 2025

Transaction ID : 30267047

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WICK, DEBRA, , ,**

Mailing Address 2991 Tillicum Beach Dr

City  
Camano IslandState  
WAZip Code  
98282-7047FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 08 / 2025

Transaction ID : 30265581

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

75.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 216 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WICK, DEBRA, , ,**

Mailing Address 2991 Tillicum Beach Dr

City  
Camano IslandState  
WAZip Code  
98282-7047FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 30 / 2025

Transaction ID : 30268229

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Wikoff, Naj, , ,**

Mailing Address PO Box 568

City  
Keene ValleyState  
NYZip Code  
12943-0568FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Naj WikoffOccupation (for Individual)  
Self 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  
05 / 13 / 2025

Transaction ID : 30268457

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Wildman, Leslie, , ,**

Mailing Address 2426 9th St

City  
BerkeleyState  
CAZip Code  
94710-2505FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
selfOccupation (for Individual)  
musician

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  
05 / 13 / 2025

Transaction ID : 30269514

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

250.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 217 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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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)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Wildman, Leslie, , ,**

Mailing Address 2426 9th St

City  
BerkeleyState  
CAZip Code  
94710-2505FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
selfOccupation (for Individual)  
musician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 18 / 2025

Transaction ID : 30269681

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Wilkins, Bonnie, , ,**

Mailing Address 4050 Depew St

City  
Wheat RidgeState  
COZip Code  
80212-7200FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 07 / 2025

Transaction ID : 30265431

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Williams, Cynthia, , ,**

Mailing Address 7302 Gladys Ave

City  
El CerritoState  
CAZip Code  
94530-2237FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Planned ParenthoodOccupation (for Individual)  
Nurse Practitioner

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  
05 / 14 / 2025

Transaction ID : 30263613

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

125.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 218 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A.** Williams, Cynthia, , ,

Mailing Address 7302 Gladys Ave

City  
El CerritoState  
CAZip Code  
94530-2237FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Planned ParenthoodOccupation (for Individual)  
Nurse Practitioner

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  
05 / 21 / 2025

Transaction ID : 30263628

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.** Williams, Jennifer, , ,

Mailing Address 4330 S Evans Ave

City  
ChicagoState  
ILZip Code  
60653-5014FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Retired Federal EmployeeOccupation (for Individual)  
Retired

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  
05 / 20 / 2025

Transaction ID : 30263134

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.** Williams, Kate, , ,

Mailing Address 770 Shelter Bay Dr

City  
La ConnerState  
WAZip Code  
98257-9531FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 28 / 2025

Transaction ID : 30267964

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

100.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 219 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A.** Williams, Patricia, , ,

Mailing Address 311 Cherry Hill Blvd

City  
Cherry HillState  
NJZip Code  
08002-1925FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 08 / 2025

Transaction ID : 30265543

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.** Williams, Patricia, , ,

Mailing Address 311 Cherry Hill Blvd

City  
Cherry HillState  
NJZip Code  
08002-1925FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 13 / 2025

Transaction ID : 30266433

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.** Winscher, Terri, , ,

Mailing Address E12861 Wynding Way

City  
MerrimacState  
WIZip Code  
53561-9599FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RetiredOccupation (for Individual)  
Retired

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  
05 / 28 / 2025

Transaction ID : 30268850

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

150.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 220 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Winters, Eryn, , ,**

Mailing Address 2617 Fernandez Dr

City  
SacramentoState  
CAZip Code  
95822-3631FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 25 / 2025

Transaction ID : 30267743

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Wise, Anne, , ,**Mailing Address 1200 W 76th St  
Apt 406City  
ClevelandState  
OHZip Code  
44102-2085FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Neighborhood Family PracticeOccupation (for Individual)  
Physician

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  
05 / 19 / 2025

Transaction ID : 30262905

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. wolter, nancy, , ,**

Mailing Address 1243 W Sherri Dr

City  
GilbertState  
AZZip Code  
85233-7811FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employedOccupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 02 / 2025

Transaction ID : 30264408

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

100.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 221 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input checked="" type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A.** wolter, nancy, , ,

Mailing Address 1243 W Sherri Dr

City  
GilbertState  
AZZip Code  
85233-7811FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employedOccupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 07 / 2025

Transaction ID : 30265154

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.** Wood, Jeanine, , ,

Mailing Address 12 Christina St

City  
LittletonState  
MAZip Code  
01460-1722FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 14 / 2025

Transaction ID : 30266500

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.** Wood, Phoebe, , ,Mailing Address 4617 Pine St  
Apt H510City  
PhiladelphiaState  
PAZip Code  
19143-6822FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 14 / 2025

Transaction ID : 30266508

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 222 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A.** Woodward, Marie jose, , ,

Mailing Address 1320 Kenwood Ln

City  
CharlottesvilleState  
VAZip Code  
22901-3139FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 26 / 2025

Transaction ID : 30267816

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.** Wozniak, Alborz, , ,

Mailing Address 351 Strand Ave

City  
Pleasant HillState  
CAZip Code  
94523-2647FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Veritas Environmental ConsultingOccupation (for Individual)  
Engineer

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  
05 / 13 / 2025

Transaction ID : 30267555

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.** Yacenda, James, , ,

Mailing Address 10662 Rockhurst Ave

City  
Santa AnaState  
CAZip Code  
92705-1422FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FHLBSFOccupation (for Individual)  
Community Investment

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  
05 / 23 / 2025

Transaction ID : 30268937

Amount of Each Receipt this Period

75.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

425.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 223 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Yen, Stanley, , ,**

Mailing Address 215 Robbins St

City  
WalthamState  
MAZip Code  
02453-5107FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
IntelOccupation (for Individual)  
Engineer

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  
05 / 04 / 2025

Transaction ID : 30268968

Amount of Each Receipt this Period

56.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Yerovsek, Ginger, , ,**Mailing Address 1321 Upland Dr  
Ste 8110City  
HoustonState  
TXZip Code  
77043-4718FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 29 / 2025

Transaction ID : 30268117

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Yu, Judith, , ,**Mailing Address 34 Willow Ave  
# 2City  
SomervilleState  
MAZip Code  
02144-3117FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employedOccupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 15 / 2025

Transaction ID : 30266682

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

131.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 224 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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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)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Yule, Chris, , ,**

Mailing Address 942 Beacon St

City  
Newton CenterState  
MAZip Code  
02459-1724FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
selfOccupation (for Individual)  
mgr

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  
05 / 11 / 2025

Transaction ID : 30269424

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Zerwick, Jim, , ,**

Mailing Address 7641 Schaller Rd

City  
VeronaState  
WIZip Code  
53593-9432FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
retiredOccupation (for Individual)  
retired

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  
05 / 08 / 2025

Transaction ID : 30268733

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Zimmerman, Mitchell, , ,**

Mailing Address 675 Maybell Ave

City  
Palo AltoState  
CAZip Code  
94306-3817FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 15 / 2025

Transaction ID : 30266655

Amount of Each Receipt this Period

200.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

350.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 225 OF 235  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input checked="" type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A.** Zuckerman, Julia, , ,

Mailing Address 1231 Neilson St

City  
BerkeleyState  
CAZip Code  
94706-2456FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Clearway Energy GroupOccupation (for Individual)  
External Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 20 / 2025

Transaction ID : 30263356

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

50.00

50019.86

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 226 OF 235

<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

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)

Indivisible Action

Full Name (Last, First, Middle Initial)

**A. ActBlue**

Mailing Address PO Box 441146

City  
West SomervilleState  
MAZip Code  
02144-0031

Purpose of Disbursement

Service Fees

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	5			2	0	2	5		

FEC Identification Number

C

Transaction ID : 500221221

Amount of Each Disbursement this Period

29.18

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ActBlue**

Mailing Address PO Box 441146

City  
West SomervilleState  
MAZip Code  
02144-0031

Purpose of Disbursement

Service Fees

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	2			2	0	2	5		

FEC Identification Number

C

Transaction ID : 500221222

Amount of Each Disbursement this Period

45.80

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ActBlue**

Mailing Address PO Box 441146

City  
West SomervilleState  
MAZip Code  
02144-0031

Purpose of Disbursement

Service Fees

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	9			2	0	2	5		

FEC Identification Number

C

Transaction ID : 500221223

Amount of Each Disbursement this Period

62.11

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

137.09

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 227 OF 235

<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)

Indivisible Action

Full Name (Last, First, Middle Initial)

**A. ActBlue**

Mailing Address PO Box 441146

City  
West SomervilleState  
MAZip Code  
02144-0031

Purpose of Disbursement

Service Fees

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M		/	D	D		/	Y	Y	Y	Y	Y	Y
0	5			2	7			2	0	2	5		

FEC Identification Number

C

Transaction ID : 500221224

Amount of Each Disbursement this Period

107.68

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

State:

District:

Date of Disbursement

M	M		/	D	D		/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M		/	D	D		/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

107.68

244.77

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 228 OF 235

<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)

Indivisible Action

Full Name (Last, First, Middle Initial)

**A. Abundance Strategies**

Mailing Address 5009 Belt Rd NW

City  
WashingtonState  
DCZip Code  
20016-4234

Purpose of Disbursement

Non-Contribution Account - Finance Consulting

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	4			2	0	2	5	

FEC Identification Number

C

Transaction ID : 500221249

Amount of Each Disbursement this Period

3833.34

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ActBlue**

Mailing Address PO Box 441146

City  
West SomervilleState  
MAZip Code  
02144-0031

Purpose of Disbursement

Non-Contribution Account - Processing Fee

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	5			2	0	2	5	

FEC Identification Number

C

Transaction ID : 500221226

Amount of Each Disbursement this Period

758.98

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ActBlue**

Mailing Address PO Box 441146

City  
West SomervilleState  
MAZip Code  
02144-0031

Purpose of Disbursement

Non-Contribution Account - Processing Fee

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	2			2	0	2	5	

FEC Identification Number

C

Transaction ID : 500221227

Amount of Each Disbursement this Period

1912.27

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6504.59

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 229 OF 235

<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)

Indivisible Action

Full Name (Last, First, Middle Initial)

**A. ActBlue**

Mailing Address PO Box 441146

City  
West SomervilleState  
MAZip Code  
02144-0031

Purpose of Disbursement

Non-Contribution Account - Processing Fee

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	9			2	0	2	5	

FEC Identification Number

**C**

Transaction ID : 500221228

Amount of Each Disbursement this Period

1636.70

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ActBlue**

Mailing Address PO Box 441146

City  
West SomervilleState  
MAZip Code  
02144-0031

Purpose of Disbursement

Non-Contribution Account - Processing Fee

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	7			2	0	2	5	

FEC Identification Number

**C**

Transaction ID : 500221229

Amount of Each Disbursement this Period

1062.06

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ActBlue**

Mailing Address PO Box 441146

City  
West SomervilleState  
MAZip Code  
02144-0031

Purpose of Disbursement

Non-Contribution Account - Processing Fee

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			3	1			2	0	2	5	

FEC Identification Number

**C**

Transaction ID : 500221230

Amount of Each Disbursement this Period

808.81

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3507.57

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 230 OF 235

<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)

Indivisible Action

Full Name (Last, First, Middle Initial)

**A. Aten Design Group, Inc.**Mailing Address 3507 Ringsby Ct  
Unit 111City  
DenverState  
COZip Code  
80216-4926

Purpose of Disbursement

Non-Contribution Account - Website

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	4			2	0	2	5	

FEC Identification Number

**C**

Transaction ID : 500216989

Amount of Each Disbursement this Period

2406.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Bill.com**

Mailing Address 1810 Embarcadero Rd

City  
Palo AltoState  
CAZip Code  
94303-3308

Purpose of Disbursement

Non-Contribution Account - Subscription

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	2	5	

FEC Identification Number

**C**

Transaction ID : 500221238

Amount of Each Disbursement this Period

522.11

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Blue State Digital**Mailing Address 41 Flatbush Ave  
Fl 8City  
BrooklynState  
NYZip Code  
11217-1160

Purpose of Disbursement

Non-Contribution Account - Digital Ad 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:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	0			2	0	2	5	

FEC Identification Number

**C**

Transaction ID : 500221244

Amount of Each Disbursement this Period

5425.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

8353.36

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 231 OF 235

<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)

Indivisible Action

Full Name (Last, First, Middle Initial)

**A. Bumperactive.com**

Mailing Address 5907 Burnet Rd

City  
AustinState  
TXZip Code  
78757-3224

Purpose of Disbursement

Non-Contribution Account - PAC Merchandise

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	4			2	0	2	5	

FEC Identification Number

**C**

Transaction ID : 500221248

Amount of Each Disbursement this Period

24346.76

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Civitech**Mailing Address 300 W 23rd St  
Apt 10NCity  
New YorkState  
NYZip Code  
10011-2244

Purpose of Disbursement

Non-Contribution Account - Text Messages

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	4			2	0	2	5	

FEC Identification Number

**C**

Transaction ID : 500221247

Amount of Each Disbursement this Period

31.66

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ComplyBlue LLC**

Mailing Address 120 Grafton St

City  
Chevy ChaseState  
MDZip Code  
20815-3426

Purpose of Disbursement

Non-Contribution Account - Compliance 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:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	0			2	0	2	5	

FEC Identification Number

**C**

Transaction ID : 500221236

Amount of Each Disbursement this Period

2000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

26378.42

# **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)

PAGE 232 OF 235

☐ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27  
☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Indivisible Action

Full Name (Last, First, Middle Initial)

**A. NGP VAN, Inc**

Mailing Address PO Box 392264

City  
Pittsburgh

State  
PA

Zip Code  
15251-9264

Purpose of Disbursement

Non-Contribution Account - Software

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 Y Y  
05 / 13 / 2025

FEC Identification Number

C

Transaction ID : 500221239

Amount of Each Disbursement this Period

1097.11

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. PoliOps, LLC**

Mailing Address 2912 Susan Sheppard Ct

City  
Glen Allen

State  
VA

Zip Code  
23060-2035

Purpose of Disbursement

Non-Contribution Account - Software

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 Y Y  
05 / 20 / 2025

FEC Identification Number

C

Transaction ID : 500221243

Amount of Each Disbursement this Period

2150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Shippo.com**

Mailing Address 2261 Market St  
Ste 5603

City  
San Francisco

State  
CA

Zip Code  
94114-1612

Purpose of Disbursement

Non-Contribution Account - Shipping

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 Y Y  
05 / 01 / 2025

FEC Identification Number

C

Transaction ID : 500221235

Amount of Each Disbursement this Period

53.99

☐ Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

3301.10



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 233 OF 235

<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)

Indivisible Action

Full Name (Last, First, Middle Initial)

**A. Shippo.com**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	5			2	0	2	5		

Mailing Address 2261 Market St  
Ste 5603City  
San FranciscoState  
CAZip Code  
94114-1612

FEC Identification Number

**C****Transaction ID : 500221241**

Amount of Each Disbursement this Period

19.00

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. Stowe, Jane, , ,**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	9			2	0	2	5		

Mailing Address 819 Peacock Rd  
IN47374City  
RichmondState  
INZip Code  
47374-2832

FEC Identification Number

**C****Transaction ID : 500221232**

Amount of Each Disbursement this Period

335.00

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. Stripe**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			3	1			2	0	2	5		

Mailing Address 510 Townsend St

City  
San FranciscoState  
CAZip Code  
94103-4918

FEC Identification Number

**C****Transaction ID : 500221231**

Amount of Each Disbursement this Period

760.07

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

**SUBTOTAL** of Disbursements This Page (optional)..... ►

1114.07

**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 PageFOR LINE NUMBER:  
(check only one)

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<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)

Indivisible Action

Full Name (Last, First, Middle Initial)

**A. The Movement Cooperative**

Mailing Address PO Box 20063

City  
New YorkState  
NYZip Code  
10001-0005

Purpose of Disbursement

Non-Contribution Account - 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:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	5			2	0	2	5	

FEC Identification Number

C

Transaction ID : 500221237

Amount of Each Disbursement this Period

2406.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. The Movement Cooperative**

Mailing Address PO Box 20063

City  
New YorkState  
NYZip Code  
10001-0005

Purpose of Disbursement

Non-Contribution Account - 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:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	4			2	0	2	5	

FEC Identification Number

C

Transaction ID : 500221246

Amount of Each Disbursement this Period

13500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. The Movement Cooperative**

Mailing Address PO Box 20063

City  
New YorkState  
NYZip Code  
10001-0005

Purpose of Disbursement

Non-Contribution Account - 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:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	7			2	0	2	5	

FEC Identification Number

C

Transaction ID : 500221242

Amount of Each Disbursement this Period

13500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

29406.25

**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 PageFOR LINE NUMBER:  
(check only one)

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<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)

Indivisible Action

Full Name (Last, First, Middle Initial)

**A. Upland IX, LLC (Dba Mobile Commons)**Mailing Address 401 Congress Ave  
Ste 1850City  
AustinState  
TXZip Code  
78701-3788

Purpose of Disbursement

Non-Contribution Account - SMS Messaging

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M		/	D	D		/	Y	Y	Y	Y	Y	Y
0	5			0	9			2	0	2	5		

FEC Identification Number

C

Transaction ID : 500221240

Amount of Each Disbursement this Period

1429.39

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

State:

District:

Date of Disbursement

M	M		/	D	D		/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M		/	D	D		/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1429.39

79994.75