

**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

KITCHEN TABLE VALUES PAC

ADDRESS (number and street)

2350 KERNER BLVD., SUITE 250

Check if different
than previously
reported. (ACC)

SAN RAFAEL

CA

94901

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C

C00924159

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 /

D D /

Y Y Y Y Y Y

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

General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y Y Y

in the
State of

5. Covering Period

M M /

D D /

Y Y Y Y Y Y

through

M M /

D D /

Y Y Y Y Y Y

07

01

2026

07

31

2026

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

LAZARUS, DAVID, , ,

Signature of Treasurer

LAZARUS, DAVID, , ,

Date

M M /

D D /

Y Y Y Y Y Y

08

20

2026

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

KITCHEN TABLE VALUES PAC

Report Covering the Period: From: MM / DD / YYYY 07 / 01 / 2026 To: MM / DD / YYYY 07 / 31 / 2026

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, YYYY YYYY	2026	20516.50
(b) Cash on Hand at Beginning of Reporting Period.....	719.76	
(c) Total Receipts (from Line 19)	19841.01	31977.76
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	20560.77	52494.26
7. Total Disbursements (from Line 31)	8414.38	40347.87
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	12146.39	12146.39
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	16273.00	



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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

KITCHEN TABLE VALUES PAC

Report Covering the Period:

From:

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

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	2	6

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).....	12125.00	20960.00
(ii) Unitemized	7716.01	11017.76
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	19841.01	31977.76
(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)	19841.01	31977.76
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	19841.01	31977.76
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	19841.01	31977.76

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	6664.38	29757.87
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	6664.38	29757.87
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	8840.00
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	1750.00	1750.00
(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)).....	1750.00	1750.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	8414.38	40347.87
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8414.38	40347.87

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)	19841.01	31977.76
34. Total Contribution Refunds (from Line 28(d))	1750.00	1750.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	18091.01	30227.76
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	6664.38	29757.87
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	6664.38	29757.87

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 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

KITCHEN TABLE VALUES PAC

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

A. BARRON, CURRIE, , ,

Mailing Address 2863 WILLOW CREEK DR

City
BOULDER

State
CO

Zip Code
80301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1750.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 22 / 2026

Transaction ID : DA199

Amount of Each Receipt this Period

1750.00

☐ Memo Item

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

B. ACTBLUE

Mailing Address P.O. BOX 962017

City
BOSTON

State
MA

Zip Code
02196

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 ▼

26977.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 06 / 2026

Transaction ID : IA88IDTA199

Amount of Each Receipt this Period

1750.00

☒ Memo Item

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

C. NELKIN, MARK, , ,

Mailing Address 684 BROADWAY 12W

City
NEW YORK

State
NY

Zip Code
10012

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CORNELL UNIVERSITY

Occupation (for Individual)
PROFESSOR EMERITUS

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
06 / 22 / 2026

Transaction ID : DA197

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

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

2250.00

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: SA11AI

Transaction ID : DA199

EARMARKED MONETARY CONTRIBUTION

Form/Schedule: SA11AI

Transaction ID: DA197

EARMARKED MONETARY CONTRIBUTION

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 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

KITCHEN TABLE VALUES PAC

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

A. ACTBLUE

Mailing Address P.O. BOX 962017

City
BOSTON

State
MA

Zip Code
02196

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 ▼

26977.76

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 06 / 2026

Transaction ID : IA88IDTA197

Amount of Each Receipt this Period

500.00

☒ Memo Item

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

B. KERREY, BOB, , ,

Mailing Address 33 FIFTH AVENUE 15CD

City
NEW YORK

State
NY

Zip Code
10003

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ALLEN AND COMPANY

Occupation (for Individual)
BANKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 25 / 2026

Transaction ID : DA207

Amount of Each Receipt this Period

1750.00

☐ Memo Item

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

C. ACTBLUE

Mailing Address P.O. BOX 962017

City
BOSTON

State
MA

Zip Code
02196

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 ▼

26977.76

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 06 / 2026

Transaction ID : IA88IDTA207

Amount of Each Receipt this Period

1750.00

☒ Memo Item

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

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

1750.00

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: SA11AI

Transaction ID : DA207

EARMARKED MONETARY CONTRIBUTION

Form/Schedule:

Transaction ID:

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 36
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

KITCHEN TABLE VALUES PAC

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

A. RICHARDS, BURTON, , ,

Mailing Address 58 SUNDOWN PARKWAY

City
AUSTIN

State
TX

Zip Code
78746

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
 06 / 28 / 2026

Transaction ID : DA227

Amount of Each Receipt this Period

125.00

☐ Memo Item

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

B. ACTBLUE

Mailing Address P.O. BOX 962017

City
BOSTON

State
MA

Zip Code
02196

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 ▼

26977.76

Date of Receipt

MM / DD / YYYY
 07 / 06 / 2026

Transaction ID : IA88IDTA227

Amount of Each Receipt this Period

125.00

☒ Memo Item

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

C. KUNITANI, PENNY, , ,

Mailing Address 2042 REDCLIFF ST

City
LOS ANGELES

State
CA

Zip Code
90039

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
 07 / 01 / 2026

Transaction ID : DA528

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

375.00

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: SA11AI

Transaction ID : DA227

EARMARKED MONETARY CONTRIBUTION

Form/Schedule: SA11AI

Transaction ID: DA528

EARMARKED MONETARY CONTRIBUTION

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 12 OF 36
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

KITCHEN TABLE VALUES PAC

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

A. ACTBLUE

Mailing Address P.O. BOX 962017

City
BOSTONState
MAZip Code
02196FEC 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 ▼

26977.76

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 01 / 2026

Transaction ID : IA130IDTA528

Amount of Each Receipt this Period

250.00

☒ Memo Item

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

B. SIMONS, ROBERT, , ,

Mailing Address 5 GERARD CIRCLE

City
WILMINGTONState
DEZip Code
19803FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

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
07 / 03 / 2026

Transaction ID : DA349

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. ACTBLUE

Mailing Address P.O. BOX 962017

City
BOSTONState
MAZip Code
02196FEC 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 ▼

26977.76

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 13 / 2026

Transaction ID : IA113IDTA349

Amount of Each Receipt this Period

250.00

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

250.00

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: SA11AI

Transaction ID : DA349

EARMARKED MONETARY CONTRIBUTION

Form/Schedule:

Transaction ID:

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 36
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

KITCHEN TABLE VALUES PAC

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

A. MARTIN, CYNTHIA, , ,

Mailing Address 2000 PENNSYLVANIA AVE
APT 6

City
WILMINGTON

State
DE

Zip Code
19806

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
07 / 14 / 2026

Transaction ID : DA277

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. ACTBLUE

Mailing Address P.O. BOX 962017

City
BOSTON

State
MA

Zip Code
02196

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 ▼

26977.76

Date of Receipt

MM / DD / YYYY
07 / 27 / 2026

Transaction ID : IA99IDTA277

Amount of Each Receipt this Period

250.00

☒ Memo Item

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

C. EVERHART, GARY, , ,

Mailing Address 1418 CHARLEEVOIX WAY

City
SCHERERVILLE

State
IN

Zip Code
46375

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
07 / 21 / 2026

Transaction ID : DA367

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

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

750.00

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: SA11AI

Transaction ID : DA277

EARMARKED MONETARY CONTRIBUTION

Form/Schedule: SA11AI

Transaction ID: DA367

EARMARKED MONETARY CONTRIBUTION

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 36
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

KITCHEN TABLE VALUES PAC

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

A. ACTBLUE

Mailing Address P.O. BOX 962017

City
BOSTON

State
MA

Zip Code
02196

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 ▼

26977.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2026

Transaction ID : IA115IDTA367

Amount of Each Receipt this Period

500.00

☒ Memo Item

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

B. RICHARDS, BURTON, , ,

Mailing Address 58 SUNDOWN PARKWAY

City
AUSTIN

State
TX

Zip Code
78746

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (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
 07 / 22 / 2026

Transaction ID : DA513

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. ACTBLUE

Mailing Address P.O. BOX 962017

City
BOSTON

State
MA

Zip Code
02196

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 ▼

26977.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2026

Transaction ID : IA115IDTA513

Amount of Each Receipt this Period

250.00

☒ Memo Item

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

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

250.00

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: SA11AI

Transaction ID : DA513

EARMARKED MONETARY CONTRIBUTION

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 18 OF 36

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

KITCHEN TABLE VALUES PAC

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

A. BLISS, MARY ELLEN, , ,

Mailing Address 564 RUSSELL AVE

City
GAITHERSBURG

State
MD

Zip Code
20877

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : DA412

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. ACTBLUE

Mailing Address P.O. BOX 962017

City
BOSTON

State
MA

Zip Code
02196

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 ▼

26977.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : IA115IDTA412

Amount of Each Receipt this Period

250.00

☒ Memo Item

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

C. SCOTT, DEBORAH, , ,

Mailing Address 1 ASPEN CT

City
CINCINNATI

State
OH

Zip Code
45246

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : DA408

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

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

750.00

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: SA11AI

Transaction ID : DA412

EARMARKED MONETARY CONTRIBUTION

Form/Schedule: SA11AI

Transaction ID: DA408

EARMARKED MONETARY CONTRIBUTION

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 20 OF 36
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

KITCHEN TABLE VALUES PAC

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

A. ACTBLUE

Mailing Address P.O. BOX 962017

City
BOSTONState
MAZip Code
02196FEC 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 ▼

26977.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : IA115IDTA408

Amount of Each Receipt this Period

500.00

☒ Memo Item

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

B. KERR, PETER, , ,

Mailing Address 10303 REINDEER TRAIL

City
NEW MARKETState
MDZip Code
21774FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)
FINRA
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
07 / 28 / 2026

Transaction ID : DA428

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

C. ACTBLUE

Mailing Address P.O. BOX 962017

City
BOSTONState
MAZip Code
02196FEC 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 ▼

26977.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2026

Transaction ID : IA117IDTA428

Amount of Each Receipt this Period

500.00

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

500.00

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: SA11AI
Transaction ID : DA428

EARMARKED MONETARY CONTRIBUTION

Form/Schedule:
Transaction ID:

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 22 OF 36
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

KITCHEN TABLE VALUES PAC

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

A. TESFATSION, LEIGH, , ,

Mailing Address 1002 JARRETT CIR

City
AMESState
IAZip Code
50014FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 28 / 2026

Transaction ID : DA435

Amount of Each Receipt this Period

1750.00

☐ Memo Item

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

B. ACTBLUE

Mailing Address P.O. BOX 962017

City
BOSTONState
MAZip Code
02196FEC 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 ▼

26977.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2026

Transaction ID : IA117IDTA435

Amount of Each Receipt this Period

1750.00

☒ Memo Item

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

C. TESFATSION, LEIGH, , ,

Mailing Address 1002 JARRETT CIR

City
AMESState
IAZip Code
50014FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 28 / 2026

Transaction ID : DA434

Amount of Each Receipt this Period

1750.00

☐ Memo Item

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

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

3500.00

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: SA11AI

Transaction ID : DA435

EARMARKED MONETARY CONTRIBUTION

Form/Schedule: SA11AI

Transaction ID: DA434

EARMARKED MONETARY CONTRIBUTION

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

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

FOR LINE NUMBER: PAGE 24 OF 36
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

KITCHEN TABLE VALUES PAC

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

A. ACTBLUE

Mailing Address P.O. BOX 962017

City
BOSTON

State
MA

Zip Code
02196

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 ▼

26977.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2026

Transaction ID : IA117IDTA434

Amount of Each Receipt this Period

1750.00

☒ Memo Item

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

B. COPE, SEIU, , ,

Mailing Address 1800 MASS AVE NW

City
WASHINGTON

State
DC

Zip Code
20036

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

SEIU

FINANCE

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
 07 / 29 / 2026

Transaction ID : DA450

Amount of Each Receipt this Period

1250.00

☐ Memo Item

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

C. ACTBLUE

Mailing Address P.O. BOX 962017

City
BOSTON

State
MA

Zip Code
02196

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 ▼

26977.76

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2026

Transaction ID : IA117IDTA450

Amount of Each Receipt this Period

1250.00

☒ Memo Item

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

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

1250.00

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: SA11AI

Transaction ID : DA450

EARMARKED MONETARY CONTRIBUTION

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 26 OF 36
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

KITCHEN TABLE VALUES PAC

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

A. FITZGERALD, MARY-OWNES, , ,

Mailing Address 4030 CARDINALVAT NORTH HILLS ST

City
RALEIGH

State
NC

Zip Code
27609

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (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
 07 / 31 / 2026

Transaction ID : DA499

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

B. ACTBLUE

Mailing Address P.O. BOX 962017

City
BOSTON

State
MA

Zip Code
02196

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 ▼

26977.76

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 31 / 2026

Transaction ID : IA117IDTA499

Amount of Each Receipt this Period

500.00

☒ 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)..... ▶

500.00

12125.00

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: SA11AI

Transaction ID : DA499

EARMARKED MONETARY CONTRIBUTION

Form/Schedule:

Transaction ID:

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

PAGE 28 OF 36

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

KITCHEN TABLE VALUES PAC

Full Name (Last, First, Middle Initial)

A. ACTBLUE

Mailing Address P.O. BOX 962017

City
BOSTONState
MAZip Code
02196

Purpose of Disbursement

PROCESSING FEE

Candidate Name

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : EB131

Amount of Each Disbursement this Period

1.89

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ACTBLUE

Mailing Address P.O. BOX 962017

City
BOSTONState
MAZip Code
02196

Purpose of Disbursement

PROCESSING FEE; CHECK # 402025445

Candidate Name

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : EB111

Amount of Each Disbursement this Period

187.54

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ACTBLUE

Mailing Address P.O. BOX 962017

City
BOSTONState
MAZip Code
02196

Purpose of Disbursement

PROCESSING FEE; CHECK #402047562

Candidate Name

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : EB109

Amount of Each Disbursement this Period

36.89

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

226.32

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

PAGE 29 OF 36

☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

KITCHEN TABLE VALUES PAC

Full Name (Last, First, Middle Initial)

A. CANDLEMORE MEDIA GROUP

Mailing Address 917 6TH STREET SW

City
WASHINGTONState
DCZip Code
20024Purpose of Disbursement
CONSULTING

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	3			2	0	2	6	

FEC Identification Number

C

Transaction ID : EB96

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DELAWARE RIVER GROUP LLC

Mailing Address 2 GEORGE CT

City
EASTONState
PAZip Code
18045Purpose of Disbursement
EXECUTIVE DIRECTOR SERVICES

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	3			2	0	2	6	

FEC Identification Number

C

Transaction ID : EB92

Amount of Each Disbursement this Period

1123.37

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. NIELSEN MERKSAMER LLP

Mailing Address 2350 KERNER BLVD, SUITE 250

City
SAN RAFAELState
CAZip Code
94901Purpose of Disbursement
LEGAL SERVICES AND PAC ADMINISTRATION

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	3			2	0	2	6	

FEC Identification Number

C

Transaction ID : EB94

Amount of Each Disbursement this Period

2825.00

☐ Memo Item

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

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

4948.37

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

PAGE 30 OF 36

☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

KITCHEN TABLE VALUES PAC

Full Name (Last, First, Middle Initial)

A. ACTBLUE

Mailing Address P.O. BOX 962017

City
BOSTONState
MAZip Code
02196

Purpose of Disbursement

PROCESSING FEE; CHECK #402061638

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : EB116

Amount of Each Disbursement this Period

110.27

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ACTBLUE

Mailing Address P.O. BOX 962017

City
BOSTONState
MAZip Code
02196

Purpose of Disbursement

PROCESSING FEE; CHECK #402056622

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : EB110

Amount of Each Disbursement this Period

70.96

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. PRICE HOUSE CONSULTING

Mailing Address 2909 METHODIST CHURCH ROAD

City
MULLINSState
SCZip Code
29574

Purpose of Disbursement

CONSULTING SERVICES

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	8		2	0	2	6		

FEC Identification Number

C

Transaction ID : EB100

Amount of Each Disbursement this Period

1000.00

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

1181.23

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

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

PAGE 31 OF 36

☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

KITCHEN TABLE VALUES PAC

Full Name (Last, First, Middle Initial)

A. ACTBLUE

Mailing Address P.O. BOX 962017

City
BOSTONState
MAZip Code
02196

Purpose of Disbursement

PROCESSING FEE; CHECK #402070732

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	2	6		

FEC Identification Number

C

Transaction ID : EB118

Amount of Each Disbursement this Period

308.46

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

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

308.46

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

6664.38

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

PAGE 32 OF 36

☐ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☒ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

KITCHEN TABLE VALUES PAC

Full Name (Last, First, Middle Initial)

A. KERREY, BOB, , ,

Mailing Address 33 FIFTH AVENUE 15CD

City
NEW YORKState
NYZip Code
10003

Purpose of Disbursement

010

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : EB126

Amount of Each Disbursement this Period

1750.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

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

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

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

1750.00

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

1750.00

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: SB28A

Transaction ID : EB126

REFUND OF CONTRIBUTION; ORIGINALLY DISCLOSED 6/25/26

Form/Schedule:

Transaction ID:

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

PAGE 34 OF 36

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

NAME OF COMMITTEE (In Full)

KITCHEN TABLE VALUES PAC

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

CANDLEMORE MEDIA GROUP

Nature of Debt (Purpose):

CONSULTING

Mailing Address 917 6TH STREET SW

City
WASHINGTONState
DCZip Code
20024

Outstanding Balance Beginning This Period

1000.00

Transaction ID : PD90

Amount Incurred This Period

0.00

Payment This Period

1000.00

Outstanding Balance at Close of This Period

0.00

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

CANDLEMORE MEDIA GROUP

Nature of Debt (Purpose):

CONSULTING SERVICES

Mailing Address 917 6TH STREET SW

City
WASHINGTONState
DCZip Code
20024

Outstanding Balance Beginning This Period

0.00

Transaction ID : PD103

Amount Incurred This Period

1200.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1200.00

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

DELAWARE RIVER GROUP LLC

Nature of Debt (Purpose):

EXECUTIVE DIRECTOR SERVICES

Mailing Address 2 GEORGE CT

City
EASTONState
PAZip Code
18045

Outstanding Balance Beginning This Period

1123.37

Transaction ID : PD77

Amount Incurred This Period

0.00

Payment This Period

1123.37

Outstanding Balance at Close of This Period

0.00

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

1200.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

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

PAGE 35 OF 36

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

NAME OF COMMITTEE (In Full)

KITCHEN TABLE VALUES PAC

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

DELAWARE RIVER GROUP LLC

Nature of Debt (Purpose):

EXECUTIVE DIRECTOR SERVICES

Mailing Address 2 GEORGE CT

City
EASTONState
PAZip Code
18045

Outstanding Balance Beginning This Period

2000.00

Transaction ID : PD89

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

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

DELAWARE RIVER GROUP LLC

Nature of Debt (Purpose):

EXECUTIVE DIRECTOR SERVICES

Mailing Address 2 GEORGE CT

City
EASTONState
PAZip Code
18045

Outstanding Balance Beginning This Period

0.00

Transaction ID : PD129

Amount Incurred This Period

2000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

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

NIELSEN MERKSAMER LLP

Nature of Debt (Purpose):

**LEGAL SERVICES AND PAC
ADMINISTRATION**

Mailing Address 2350 KERNER BLVD, SUITE 250

City
SAN RAFAELState
CAZip Code
94901

Outstanding Balance Beginning This Period

4065.50

Transaction ID : PD47

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4065.50

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

8065.50

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

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

PAGE 36 OF 36

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

NAME OF COMMITTEE (In Full)

KITCHEN TABLE VALUES PAC

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

NIELSEN MERKSAMER LLP

Nature of Debt (Purpose):

LEGAL SERVICES AND PAC
ADMINISTRATION

Mailing Address 2350 KERNER BLVD, SUITE 250

City

SAN RAFAEL

State

CA

Zip Code

94901

Outstanding Balance Beginning This Period

4821.00

Transaction ID : PD75

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4821.00

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

NIELSEN MERKSAMER LLP

Nature of Debt (Purpose):

LEGAL SERVICES AND PAC
ADMINISTRATION

Mailing Address 2350 KERNER BLVD, SUITE 250

City

SAN RAFAEL

State

CA

Zip Code

94901

Outstanding Balance Beginning This Period

2825.00

Transaction ID : PD91

Amount Incurred This Period

0.00

Payment This Period

2825.00

Outstanding Balance at Close of This Period

0.00

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

NIELSEN MERKSAMER LLP

Nature of Debt (Purpose):

LEGAL SERVICES AND PAC
ADMINISTRATION

Mailing Address 2350 KERNER BLVD, SUITE 250

City

SAN RAFAEL

State

CA

Zip Code

94901

Outstanding Balance Beginning This Period

0.00

Transaction ID : PD119

Amount Incurred This Period

2186.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

2186.50

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

7007.50

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

16273.00

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

0.00

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

16273.00