

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Northern California Carpenters Regional Council POWER PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2025"/>	<input type="text"/>	<input type="text" value="2031827.57"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="2714515.75"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="982394.69"/>	<input type="text" value="1844236.13"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="3696910.44"/>	<input type="text" value="3876063.70"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="214623.93"/>	<input type="text" value="393777.19"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="3482286.51"/>	<input type="text" value="3482286.51"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="1480.04"/>	

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

Write or Type Committee Name

Northern California Carpenters Regional Council POWER PAC

Report Covering the Period: From: MM / DD / YYYY 07 / 01 / 2025 To: MM / DD / YYYY 12 / 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).....	956076.63	1797484.93
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	956076.63	1797484.93
(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)	956076.63	1797484.93
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.).....	26318.06	46751.20
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)).....▶	982394.69	1844236.13
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	982394.69	1844236.13

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	21673.93	53377.19
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	21673.93	53377.19
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	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).....	192950.00	340400.00
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)) ..	214623.93	393777.19
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	214623.93	393777.19

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)	956076.63	1797484.93
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	956076.63	1797484.93
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	21673.93	53377.19
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	21673.93	53377.19

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 32
<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)
Northern California Carpenters Regional Council POWER PAC

A. Northern California Carpenters Regional Council

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 265 Hegenberger Rd, Suite 200

City Oakland	State CA	Zip Code 94621
-----------------	-------------	-------------------

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 ▼
1797484.93

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		08		2025

Transaction ID : PA161

Amount of Each Receipt this Period
2501.45

Memo Item
In-kind: Legal & Reporting Services

B. Northern California Carpenters Regional Council

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 265 Hegenberger Rd, Suite 200

City Oakland	State CA	Zip Code 94621
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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 ▼
1797484.93

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		14		2025

Transaction ID : IA145

Amount of Each Receipt this Period
171605.91

Memo Item

C. Northern California Carpenters Regional Council

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 265 Hegenberger Rd, Suite 200

City Oakland	State CA	Zip Code 94621
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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 ▼
1797484.93

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		22		2025

Transaction ID : IA174

Amount of Each Receipt this Period
175576.77

Memo Item

SUBTOTAL of Receipts This Page (optional).....	349684.13
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 32
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Northern California Carpenters Regional Council POWER PAC

A. Northern California Carpenters Regional Council

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

Mailing Address 265 Hegenberger Rd, Suite 200

City Oakland	State CA	Zip Code 94621
-----------------	-------------	-------------------

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 ▼
1797484.93

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2025

Transaction ID : NA254

Amount of Each Receipt this Period
1450.93

Memo Item

In-kind: Legal & Reporting Services

B. Northern California Carpenters Regional Council

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

Mailing Address 265 Hegenberger Rd, Suite 200

City Oakland	State CA	Zip Code 94621
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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 ▼
1797484.93

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		17		2025

Transaction ID : IA181

Amount of Each Receipt this Period
137902.41

Memo Item

C. Northern California Carpenters Regional Council

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

Mailing Address 265 Hegenberger Rd, Suite 200

City Oakland	State CA	Zip Code 94621
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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 ▼
1797484.93

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2025

Transaction ID : NA255

Amount of Each Receipt this Period
1594.97

Memo Item

In-kind: Legal & Reporting Services

SUBTOTAL of Receipts This Page (optional).....▶	140948.31
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 32
	<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)
Northern California Carpenters Regional Council POWER PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Northern California Carpenters Regional Council

Mailing Address 265 Hegenberger Rd, Suite 200

City Oakland	State CA	Zip Code 94621
-----------------	-------------	-------------------

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 ▼
1797484.93

Date of Receipt

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

Transaction ID : NA256

Amount of Each Receipt this Period
1361.50

Memo Item

In-kind: Legal & Reporting Services

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Northern California Carpenters Regional Council

Mailing Address 265 Hegenberger Rd, Suite 200

City Oakland	State CA	Zip Code 94621
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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 ▼
1797484.93

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2025

Transaction ID : IA198

Amount of Each Receipt this Period
93885.75

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Northern California Carpenters Regional Council

Mailing Address 265 Hegenberger Rd, Suite 200

City Oakland	State CA	Zip Code 94621
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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 ▼
1797484.93

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2025

Transaction ID : IA215

Amount of Each Receipt this Period
88302.15

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	183549.40
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 32
	<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)
Northern California Carpenters Regional Council POWER PAC

A. Northern California Carpenters Regional Council

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

Mailing Address 265 Hegenberger Rd, Suite 200

City Oakland	State CA	Zip Code 94621
-----------------	-------------	-------------------

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 ▼
1797484.93

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	25	/	2025

Transaction ID : NA257

Amount of Each Receipt this Period
2649.58

Memo Item

In-kind: Legal & Reporting Services

B. Northern California Carpenters Regional Council

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

Mailing Address 265 Hegenberger Rd, Suite 200

City Oakland	State CA	Zip Code 94621
-----------------	-------------	-------------------

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 ▼
1797484.93

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2025

Transaction ID : IA236

Amount of Each Receipt this Period
70251.50

Memo Item

C. Northern California Carpenters Regional Council

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

Mailing Address 265 Hegenberger Rd, Suite 200

City Oakland	State CA	Zip Code 94621
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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 ▼
1797484.93

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	16	/	2025

Transaction ID : NA258

Amount of Each Receipt this Period
1633.50

Memo Item

In-kind: Legal & Reporting Services

SUBTOTAL of Receipts This Page (optional).....▶	74534.58
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 10 OF 32
(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)
Northern California Carpenters Regional Council POWER PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Northern California Carpenters Regional Council

Mailing Address 265 Hegenberger Rd, Suite 200

City Oakland	State CA	Zip Code 94621
-----------------	-------------	-------------------

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 ▼
1797484.93

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	30	/	2025

Transaction ID : IA246

Amount of Each Receipt this Period
207360.21

Memo Item

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

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	207360.21
TOTAL This Period (last page this line number only).....	956076.63

**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 32
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Northern California Carpenters Regional Council POWER PAC

A. First Foundation Bank
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18101 Von Karman Avenue, 7th Floor
 City Irvine State CA Zip Code 92612
 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 ▼
 46751.20

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2025
Transaction ID : IA175
 Amount of Each Receipt this Period
 236.63
 Memo Item
 Interest Earned

B. First Foundation Bank
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18101 Von Karman Avenue, 7th Floor
 City Irvine State CA Zip Code 92612
 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 ▼
 46751.20

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2025
Transaction ID : IA176
 Amount of Each Receipt this Period
 4000.51
 Memo Item
 Interest Earned

C. First Foundation Bank
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18101 Von Karman Avenue, 7th Floor
 City Irvine State CA Zip Code 92612
 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 ▼
 46751.20

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2025
Transaction ID : IA182
 Amount of Each Receipt this Period
 221.37
 Memo Item
 Interest Earned

SUBTOTAL of Receipts This Page (optional)..... ▶ 4458.51
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 32
<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)
Northern California Carpenters Regional Council POWER PAC

A. First Foundation Bank

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

Mailing Address 18101 Von Karman Avenue, 7th Floor

City Irvine	State CA	Zip Code 92612
----------------	-------------	-------------------

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 ▼
46751.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2025

Transaction ID : IA183

Amount of Each Receipt this Period
4069.42

Memo Item

Interest Earned

B. First Foundation Bank

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

Mailing Address 18101 Von Karman Avenue, 7th Floor

City Irvine	State CA	Zip Code 92612
----------------	-------------	-------------------

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 ▼
46751.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2025

Transaction ID : IA203

Amount of Each Receipt this Period
221.16

Memo Item

Interest Earned

C. First Foundation Bank

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

Mailing Address 18101 Von Karman Avenue, 7th Floor

City Irvine	State CA	Zip Code 92612
----------------	-------------	-------------------

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 ▼
46751.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2025

Transaction ID : IA204

Amount of Each Receipt this Period
4346.07

Memo Item

Interest Earned

SUBTOTAL of Receipts This Page (optional).....▶	8636.65
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 32
<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)
Northern California Carpenters Regional Council POWER PAC

A. First Foundation Bank

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

Mailing Address 18101 Von Karman Avenue, 7th Floor

City Irvine	State CA	Zip Code 92612
----------------	-------------	-------------------

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 ▼
46751.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2025

Transaction ID : IA216

Amount of Each Receipt this Period
223.87

Memo Item

Interest Earned

B. First Foundation Bank

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

Mailing Address 18101 Von Karman Avenue, 7th Floor

City Irvine	State CA	Zip Code 92612
----------------	-------------	-------------------

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 ▼
46751.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2025

Transaction ID : IA217

Amount of Each Receipt this Period
4396.48

Memo Item

Interest Earned

C. First Foundation Bank

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

Mailing Address 18101 Von Karman Avenue, 7th Floor

City Irvine	State CA	Zip Code 92612
----------------	-------------	-------------------

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 ▼
46751.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2025

Transaction ID : IA238

Amount of Each Receipt this Period
4046.92

Memo Item

Interest Earned

SUBTOTAL of Receipts This Page (optional).....▶	8667.27
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 14 OF 32
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Northern California Carpenters Regional Council POWER PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. First Foundation Bank
 Mailing Address 18101 Von Karman Avenue, 7th Floor
 City Irvine State CA Zip Code 92612
 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 ▼
 46751.20

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2025
Transaction ID : IA237
 Amount of Each Receipt this Period
 193.69
 Memo Item
 Interest Earned

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. First Foundation Bank
 Mailing Address 18101 Von Karman Avenue, 7th Floor
 City Irvine State CA Zip Code 92612
 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 ▼
 46751.20

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2025
Transaction ID : IA248
 Amount of Each Receipt this Period
 201.34
 Memo Item
 Interest Earned

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. First Foundation Bank
 Mailing Address 18101 Von Karman Avenue, 7th Floor
 City Irvine State CA Zip Code 92612
 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 ▼
 46751.20

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2025
Transaction ID : IA249
 Amount of Each Receipt this Period
 4160.60
 Memo Item
 Interest Earned

SUBTOTAL of Receipts This Page (optional).....▶	4555.63
TOTAL This Period (last page this line number only).....▶	26318.06

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Northern California Carpenters Regional Council POWER PAC

A. Keys Law Corporation

Full Name (Last, First, Middle Initial)

Mailing Address 1001 G Street, Suite 201

City Sacramento State CA Zip Code 95814

Purpose of Disbursement
In-kind: Legal & Reporting Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 07 / 08 / 2025

FEC Identification Number: C

Transaction ID : **PBFT161**

Amount of Each Disbursement this Period: 2501.45

Memo Item

B. Northern California Carpenters Regional Council

Full Name (Last, First, Middle Initial)

Mailing Address 265 Hegenberger Rd, Suite 200

City Oakland State CA Zip Code 94621

Purpose of Disbursement
In-kind: Legal & Reporting Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 07 / 08 / 2025

FEC Identification Number: C

Transaction ID : **PB161**

Amount of Each Disbursement this Period: 2501.45

Memo Item

C. Northern California Carpenters Regional Council

Full Name (Last, First, Middle Initial)

Mailing Address 265 Hegenberger Rd, Suite 200

City Oakland State CA Zip Code 94621

Purpose of Disbursement
In-kind: Legal & Reporting Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 29 / 2025

FEC Identification Number: C

Transaction ID : **NB254**

Amount of Each Disbursement this Period: 1450.93

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3952.38

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Northern California Carpenters Regional Council POWER PAC

Full Name (Last, First, Middle Initial)

A. Northern California Carpenters Regional Council

Mailing Address 265 Hegenberger Rd, Suite 200

City Oakland State CA Zip Code 94621

Purpose of Disbursement

In-kind: Legal & Reporting Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 19 / 2025

FEC Identification Number

C []

Transaction ID : NB255

Amount of Each Disbursement this Period

[] 1594.97

Memo Item

Full Name (Last, First, Middle Initial)

B. Northern California Carpenters Regional Council

Mailing Address 265 Hegenberger Rd, Suite 200

City Oakland State CA Zip Code 94621

Purpose of Disbursement

In-kind: Legal & Reporting Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 10 / 2025

FEC Identification Number

C []

Transaction ID : NB256

Amount of Each Disbursement this Period

[] 1361.50

Memo Item

Full Name (Last, First, Middle Initial)

C. Franchise Tax Board

Mailing Address 9646 Butterfield Way

City Sacramento State CA Zip Code 95827

Purpose of Disbursement

Tax Payment

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 14 / 2025

FEC Identification Number

C []

Transaction ID : EB197

Amount of Each Disbursement this Period

[] 1983.00

Memo Item

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

[] 4939.47

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

[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Northern California Carpenters Regional Council POWER PAC

Full Name (Last, First, Middle Initial) A. Internal Revenue Service		Date of Disbursement MM / DD / YYYY 10 / 14 / 2025	
Mailing Address Ogden Service Center		FEC Identification Number C [REDACTED] Transaction ID : EB196 Amount of Each Disbursement this Period 4289.00	
City Ogden	State UT	Zip Code 94201	Category/ Type 001
Purpose of Disbursement Tax Payment		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. WithumSmith+Brown, PC		Date of Disbursement MM / DD / YYYY 10 / 24 / 2025	
Mailing Address 506 Carnegie Center Dr #400		FEC Identification Number C [REDACTED] Transaction ID : EB205 Amount of Each Disbursement this Period 3120.00	
City Princeton	State NJ	Zip Code 08540	Category/ Type 001
Purpose of Disbursement Tax Audit Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. WithumSmith+Brown, PC		Date of Disbursement MM / DD / YYYY 11 / 17 / 2025	
Mailing Address 506 Carnegie Center Dr #400		FEC Identification Number C [REDACTED] Transaction ID : EB214 Amount of Each Disbursement this Period 1040.00	
City Princeton	State NJ	Zip Code 08540	Category/ Type 001
Purpose of Disbursement Tax Audit Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	8449.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Northern California Carpenters Regional Council POWER PAC

Full Name (Last, First, Middle Initial)

A. Northern California Carpenters Regional Council

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		25		2025

Mailing Address 265 Hegenberger Rd, Suite 200

City Oakland State CA Zip Code 94621

FEC Identification Number

C []

Transaction ID : NB257

Amount of Each Disbursement this Period

[] 2649.58 []

Memo Item

Purpose of Disbursement

In-kind: Legal & Reporting Services

[]

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Northern California Carpenters Regional Council

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		16		2025

Mailing Address 265 Hegenberger Rd, Suite 200

City Oakland State CA Zip Code 94621

FEC Identification Number

C []

Transaction ID : NB258

Amount of Each Disbursement this Period

[] 1633.50 []

Memo Item

Purpose of Disbursement

In-kind: Legal & Reporting Services

[]

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
[]		[]		[]

Mailing Address

City State Zip Code

FEC Identification Number

C []

Amount of Each Disbursement this Period

[] []

Memo Item

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

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

[] 4283.08 []

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

[] 21623.93 []

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)

Northern California Carpenters Regional Council POWER PAC

Full Name (Last, First, Middle Initial)

A. Bernal for Antioch Mayor 2024, Ron

Mailing Address 5065 Deer Valley Road, Ste 117A

City Antioch State CA Zip Code 94531

Purpose of Disbursement
Contribution to Non-Federal Committee

Category/
Type

Candidate Name
Bernal for Antioch Mayor 2024, Ron

Office Sought: House Senate President
Disbursement For: 2024
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : EB166
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Connolly for Senate 2026, Damon

Mailing Address 1700 Tribute Rd, Suite 201

City Sacramento State CA Zip Code 95815

Purpose of Disbursement
Contribution to Non-Federal Committee

Category/
Type

Candidate Name
Connolly for Senate 2026, Damon

Office Sought: House Senate President
Disbursement For: 2026
 Primary General
 Other (specify)

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : EB164
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Ellenberg for Supervisor 2026, Susan

Mailing Address 312 Clay Street, Suite 300

City Oakland State CA Zip Code 94607

Purpose of Disbursement
Contribution to Non-Federal Committee

Category/
Type

Candidate Name
Ellenberg for Supervisor 2026, Susan

Office Sought: House Senate President
Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : EB167
Amount of Each Disbursement this Period

Memo Item

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

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : EB166

Debt Retirement

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Northern California Carpenters Regional Council POWER PAC

Full Name (Last, First, Middle Initial)

A. Rivas for Assembly 2026, Robert

Mailing Address 1700 Tribute Rd, Suite 201

City Sacramento State CA Zip Code 95815

Purpose of Disbursement
Contribution to Non-Federal Committee

011
Category/
Type

Candidate Name
Rivas for Assembly 2026, Robert

Office Sought: House Senate President
Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 11 / 2025

FEC Identification Number

C
Transaction ID : EB162
Amount of Each Disbursement this Period
11800.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Bonta for CA Attorney General 2026, Rob

Mailing Address 1700 Tribute Road, Suite 201

City Sacramento State CA Zip Code 95815

Purpose of Disbursement
Void Check

011
Category/
Type

Candidate Name
Bonta for CA Attorney General 2026, Rob

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

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 13 / 2025

FEC Identification Number

C
Transaction ID : EB171
Amount of Each Disbursement this Period
- 2800.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Sandoval for Salinas City Council District 5 2026

Mailing Address 405 Cayuga Street

City Salinas State CA Zip Code 93901

Purpose of Disbursement
Void Check

011
Category/
Type

Candidate Name
Sandoval for Salinas City Council District 5 2026

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

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 13 / 2025

FEC Identification Number

C
Transaction ID : EB170
Amount of Each Disbursement this Period
- 5000.00

Memo Item

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

4000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Northern California Carpenters Regional Council POWER PAC

Full Name (Last, First, Middle Initial)

A. Bonta for CA Attorney General 2026, Rob

Mailing Address 1700 Tribute Road, Suite 201

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	5		2	0	2	5

City Sacramento	State CA	Zip Code 95815
--------------------	-------------	-------------------

FEC Identification Number

C

Transaction ID : EB172

Amount of Each Disbursement this Period

2	8	0	0	0	0
---	---	---	---	---	---

Memo Item

Purpose of Disbursement
Contribution to Non-Federal Committee

011
Category/ Type

Candidate Name
Bonta for CA Attorney General 2026, Rob

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	

Full Name (Last, First, Middle Initial)

B. Engardio Recall, No on A, Stop The

Mailing Address 393 7th Avenue, Suite 301

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	0		2	0	2	5

City San Francisco	State CA	Zip Code 94118
-----------------------	-------------	-------------------

FEC Identification Number

C

Transaction ID : EB173

Amount of Each Disbursement this Period

5	0	0	0	0	0
---	---	---	---	---	---

Memo Item

Purpose of Disbursement
Contribution to Non-Federal Committee

011
Category/ Type

Candidate Name
Engardio Recall, No on A, Stop The

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2025 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)
State: District:	

Full Name (Last, First, Middle Initial)

C. California Progressive PAC

Mailing Address 777 S. Figueroa Street, Suite 4050

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	1		2	0	2	5

City Los Angeles	State CA	Zip Code 90039
---------------------	-------------	-------------------

FEC Identification Number

C

Transaction ID : EB179

Amount of Each Disbursement this Period

5	0	0	0	0	0
---	---	---	---	---	---

Memo Item

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	

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

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

5	7	8	0	0	0
---	---	---	---	---	---

--	--	--	--	--	--

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Northern California Carpenters Regional Council POWER PAC

Full Name (Last, First, Middle Initial)

A. Zhao for Santa Clara County Assessor 2025, Yan

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	11	/	2025

Mailing Address 19034 Bonnet Way

FEC Identification Number

C

Transaction ID : EB180

Amount of Each Disbursement this Period

1000.00

Memo Item

City Saratoga State CA Zip Code 95070

Purpose of Disbursement
Contribution to Non-Federal Committee

011
Category/ Type

Candidate Name
Zhao for Santa Clara County Assessor 2025, Yan

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

Full Name (Last, First, Middle Initial)

B. Velaquez & Kosmicki, Recall Supervisor

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	03	/	2025

Mailing Address 1760 Airline Hwy, Suite F #158

FEC Identification Number

C

Transaction ID : EB192

Amount of Each Disbursement this Period

2500.00

Memo Item

City Hollister State CA Zip Code 95023

Purpose of Disbursement
Contribution to Non-Federal Committee

011
Category/ Type

Candidate Name
RecallSupervisorVelaquez, , ,

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

Full Name (Last, First, Middle Initial)

C. Velaquez & Kosmicki, Recall Supervisor

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	03	/	2025

Mailing Address 1760 Airline Hwy, Suite F #158

FEC Identification Number

C

Transaction ID : EB193

Amount of Each Disbursement this Period

2500.00

Memo Item

City Hollister State CA Zip Code 95023

Purpose of Disbursement
Contribution to Non-Federal Committee

011
Category/ Type

Candidate Name
RecallSupervisorKosmicki, , ,

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

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

6000.00

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

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: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`-H9A-N5H-CB

Form/Schedule: SB29

Transaction ID : EB192

Full committee name: Public Safety First: Committee to Recall Supervisor Velaquez and Kosmicki

Form/Schedule: SB29

Transaction ID: EB193

Full committee name: Public Safety First: Committee to Recall Supervisor Velaquez and Kosmicki

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Northern California Carpenters Regional Council POWER PAC

Full Name (Last, First, Middle Initial)

A. San Francisco Democratic County Central Committee

Mailing Address 1390 Market St Suite 200

City San Francisco State CA Zip Code 94102

Purpose of Disbursement

Contribution to Non-Federal Committee

011
Category/ Type

Candidate Name

San Francisco Democratic County Central Committee

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
10		31		2025

FEC Identification Number

C

Transaction ID : EB195

Amount of Each Disbursement this Period

25000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Jones Dickson for District Attorney 2026, Friends of Ursula

Mailing Address 312 Clay Street, Suite 300

City Oakland State CA Zip Code 94607

Purpose of Disbursement

Contribution to Non-Federal Committee

011
Category/ Type

Candidate Name

Jones Dickson for District Attorney 2026, Friends of Ursula

Office Sought: House Senate President

Disbursement For: 2026 Primary General Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		05		2025

FEC Identification Number

C

Transaction ID : EB208

Amount of Each Disbursement this Period

10000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Lucan for Assembly 2026, Eric

Mailing Address 5445 Madison Avenue

City Sacramento State CA Zip Code 95841

Purpose of Disbursement

Contribution to Non-Federal Committee

011
Category/ Type

Candidate Name

Lucan for Assembly 2026, Eric

Office Sought: House Senate President

Disbursement For: 2026 Primary General Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		05		2025

FEC Identification Number

C

Transaction ID : EB209

Amount of Each Disbursement this Period

11800.00

Memo Item

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

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

46800.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Northern California Carpenters Regional Council POWER PAC

Full Name (Last, First, Middle Initial)

A. Marquez for County Supervisor 2026, Elisa

Mailing Address 333 W. San Carlos St Suite 600

City San Jose State CA Zip Code 95110

Purpose of Disbursement
Contribution to Non-Federal Committee

011
Category/ Type

Candidate Name
Marquez for County Supervisor 2026, Elisa

Office Sought: House Senate President
Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		05		2025

FEC Identification Number

C
Transaction ID : EB206
Amount of Each Disbursement this Period
5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Williams for Solano County Supervisor 2026, Wanda

Mailing Address 371 Lakeport Blvd #391

City Lakeport State CA Zip Code 95453

Purpose of Disbursement
Contribution to Non-Federal Committee

011
Category/ Type

Candidate Name
Williams for Solano County Supervisor 2026, Wanda

Office Sought: House Senate President
Disbursement For: 2026
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		05		2025

FEC Identification Number

C
Transaction ID : EB207
Amount of Each Disbursement this Period
5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. McGuire for Insurance Commissioner 2026, Mike

Mailing Address 312 Clay Street, Suite 300

City Oakland State CA Zip Code 94607

Purpose of Disbursement
Void Check

011
Category/ Type

Candidate Name
McGuire for Insurance Commissioner 2026, Mike

Office Sought: House Senate President
Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		10		2025

FEC Identification Number

C
Transaction ID : EB212
Amount of Each Disbursement this Period
- 3000.00

Memo Item

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

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

7000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Northern California Carpenters Regional Council POWER PAC

Full Name (Last, First, Middle Initial)

A. Melgar for Supervisor 2024, Re-Elect Myrna

Mailing Address 56 West Portal Ave #289

City San Francisco State CA Zip Code 94127

Purpose of Disbursement
Contribution to Non-Federal Committee

011
Category/
Type

Candidate Name
Melgar for Supervisor 2024, Re-Elect Myrna

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
11 / 14 / 2025

FEC Identification Number
C
Transaction ID : EB213
Amount of Each Disbursement this Period
500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Jenkins for Oakland City Council 2026, Re-Elect Kevin

Mailing Address 6114 Majestic Avenue

City Oakland State CA Zip Code 94605

Purpose of Disbursement
Void Check

011
Category/
Type

Candidate Name
Jenkins for Oakland City Council 2026, Re-Elect Kevin

Office Sought: House Senate President
Disbursement For: 2026 Primary General Other (specify) ▼
State: District:

Date of Disbursement
M M / D D / Y Y Y Y Y Y
12 / 03 / 2025

FEC Identification Number
C
Transaction ID : EB228
Amount of Each Disbursement this Period
- 650.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Rivas for Assembly 2026, Robert

Mailing Address 1700 Tribute Rd, Suite 201

City Sacramento State CA Zip Code 95815

Purpose of Disbursement
Void Check

011
Category/
Type

Candidate Name
Rivas for Assembly 2026, Robert

Office Sought: House Senate President
Disbursement For: 2026 Primary General Other (specify) ▼
State: District:

Date of Disbursement
M M / D D / Y Y Y Y Y Y
12 / 03 / 2025

FEC Identification Number
C
Transaction ID : EB229
Amount of Each Disbursement this Period
- 11800.00

Memo Item

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

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

- 11950.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : EB213

Contribution to retire net debts

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Northern California Carpenters Regional Council POWER PAC

Full Name (Last, First, Middle Initial)

A. Bay Area Legislative Leaders PAC

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			10			2025			

Mailing Address 5445 Madison Avenue

City Sacramento	State CA	Zip Code 95841
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FEC Identification Number

C

Transaction ID : EB234

Amount of Each Disbursement this Period

2500.00

Memo Item

Purpose of Disbursement

Contribution to Non-Federal Committee

011
Category/ Type

Candidate Name

Bay Area Legislative Leaders PAC

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Full Name (Last, First, Middle Initial)

B. Fife for City Council 2024, Carroll

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			10			2025			

Mailing Address 371 Lakeport Blvd #391

City Lakeport	State CA	Zip Code 95453
------------------	-------------	-------------------

FEC Identification Number

C

Transaction ID : EB235

Amount of Each Disbursement this Period

1300.00

Memo Item

Purpose of Disbursement

Contribution to Non-Federal Committee

011
Category/ Type

Candidate Name

Fife for City Council 2024, Carroll

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Full Name (Last, First, Middle Initial)

C. Rendon for Superintendent of Public Instruction 2026, Anthony

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			10			2025			

Mailing Address 249 E. Ocean Blvd., Ste 814

City Long Beach	State CA	Zip Code 90802
--------------------	-------------	-------------------

FEC Identification Number

C

Transaction ID : EB231

Amount of Each Disbursement this Period

19600.00

Memo Item

Purpose of Disbursement

Contribution to Non-Federal Committee

011
Category/ Type

Candidate Name

Rendon for Superintendent of Public Instruction 2026, Anthony

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

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

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

45900.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29
Transaction ID : EB235

Contribution to retire net debts

Form/Schedule:
Transaction ID:

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)

Northern California Carpenters Regional Council POWER PAC

Full Name (Last, First, Middle Initial)

A. United Democratic Club of San Francisco

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		10		2025

Mailing Address 2126 Mason St

City San Francisco State CA Zip Code 94133

FEC Identification Number

C []

Transaction ID : EB233

Amount of Each Disbursement this Period

[] 1000.00

Purpose of Disbursement
Contribution to Non-Federal Committee

011

Category/Type

Candidate Name

United Democratic Club of San Francisco

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

B. Weber for Secretary of State 2026, Shirley

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		10		2025

Mailing Address 3230 Arena Blvd Ste 245-416

City Sacramento State CA Zip Code 95834

FEC Identification Number

C []

Transaction ID : EB232

Amount of Each Disbursement this Period

[] 19600.00

Purpose of Disbursement
Contribution to Non-Federal Committee

011

Category/Type

Candidate Name

Weber for Secretary of State 2026, Shirley

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

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

Mailing Address

City State Zip Code

FEC Identification Number

C []

Amount of Each Disbursement this Period

[]

Purpose of Disbursement

[]

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Memo Item

State: District:

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

[] 20600.00

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

[] 192950.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 32 OF 32
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Northern California Carpenters Regional Council POWER PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Keys Law Corporation			Nature of Debt (Purpose): Legal & Reporting Services
Mailing Address 1001 G Street, Suite 201			
City Sacramento	State CA	Zip Code 95814	

Outstanding Balance Beginning This Period 2501.45		Transaction ID : PD160	
Amount Incurred This Period 0.00	Payment This Period 2501.45	Outstanding Balance at Close of This Period 0.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Keys Law Corporation			Nature of Debt (Purpose): Legal & Reporting Services
Mailing Address 1001 G Street, Suite 201			
City Sacramento	State CA	Zip Code 95814	

Outstanding Balance Beginning This Period 0.00		Transaction ID : PD260	
Amount Incurred This Period 1480.04	Payment This Period 0.00	Outstanding Balance at Close of This Period 1480.04	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

1) SUBTOTALS This Period This Page (optional)..... ▶	1480.04
2) TOTALS This Period (last page this line number only)..... ▶	1480.04
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) ▶	1480.04