

**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

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

ADDRESS (number and street)

81 Prospect St

Check if different
than previously
reported. (ACC)

BROOKLYN

NY

11201

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00606962

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)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

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
06 01 2022

through

M M / D D / Y Y Y Y Y Y
06 30 2022

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Boland, Michael, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Boland, Michael, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
07 20 2022

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

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

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

Report Covering the Period: From: M M / D D / Y Y Y Y 06 / 01 / 2022 To: M M / D D / Y Y Y Y 06 / 30 / 2022

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y 2022		1812254.17
(b) Cash on Hand at Beginning of Reporting Period.....	4112192.93	
(c) Total Receipts (from Line 19)	1888842.15	8149173.71
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	6001035.08	9961427.88
7. Total Disbursements (from Line 31).....	1475068.01	5435460.81
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	4525967.07	4525967.07
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	1881.15	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	721298.05	



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

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y
06 01 2022

To:

M M / D D / Y Y Y Y Y
06 30 2022

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).....

7681.97

98388.38

(ii) Unitemized

16809.58

138753.19

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

24491.55

237141.57

(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).....▶

24491.55

237141.57

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).....

15745.82

15745.82

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

6500.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

1848604.78

7889786.32

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)).....▶

1888842.15

8149173.71

20. Total Federal Receipts

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

1888842.15

8149173.71

DETAILED SUMMARY PAGE of Disbursements

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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	107301.28	383670.51
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	107301.28	383670.51
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10000.00	55200.00
24. Independent Expenditures (use Schedule E)	582150.60	3369174.19
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	43917.12
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).....	775616.13	1583498.99
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)) ..	1475068.01	5435460.81
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1475068.01	5435460.81

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)	24491.55	237141.57
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	24491.55	237141.57
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	107301.28	383670.51
37. Offsets to Operating Expenditures (from Line 15, page 3).....	15745.82	15745.82
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	91555.46	367924.69

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 113

(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)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

A. ALTMAN, DANIEL, , ,

Mailing Address 1229 WATERVIEW DR

City
MILL VALLEY

State
CA

Zip Code
94941

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
A HUNDRED MONKEYS

Occupation (for Individual)
CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2085.84

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 10 / 2022

Transaction ID : SA11AI.150616

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

B. ALTMAN, DANIEL, , ,

Mailing Address 1229 WATERVIEW DR

City
MILL VALLEY

State
CA

Zip Code
94941

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
A HUNDRED MONKEYS

Occupation (for Individual)
CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2235.84

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 13 / 2022

Transaction ID : SA11AI.150691

Amount of Each Receipt this Period

150.00

☐ Memo Item

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

C. ALTMAN, DANIEL, , ,

Mailing Address 1229 WATERVIEW DR

City
MILL VALLEY

State
CA

Zip Code
94941

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
A HUNDRED MONKEYS

Occupation (for Individual)
CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2285.84

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 15 / 2022

Transaction ID : SA11AI.150797

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

400.00

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

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

FOR LINE NUMBER: PAGE 7 OF 113

(check only one)

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

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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

A. Ancona, Jenifer, , ,

Mailing Address 3830-E 19th Street

City
San Francisco

State
CA

Zip Code
94114

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.86

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 06 / 2022

Transaction ID : SA11AI.150441

Amount of Each Receipt this Period

27.00

☐ Memo Item

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

B. Bhansali, Rajasvini, , ,

Mailing Address PO Box 5209

City
Richmond

State
CA

Zip Code
94804

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Solidaire Action Fund

Occupation (for Individual)
Executive Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

792.10

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 05 / 2022

Transaction ID : SA11AI.150420

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. Bowles, Crandall, , ,

Mailing Address 6725 Old Providence Road

City
Charlotte

State
NC

Zip Code
28226

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
The Springs Company

Occupation (for Individual)
chairman

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 06 / 2022

Transaction ID : SA11AI.150470

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)..... ►

627.00

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

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

FOR LINE NUMBER: PAGE 8 OF 113

(check only one)

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

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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

A. brown, adrienne, , ,

Mailing Address 3745 2ND AVE APT 2S

City
DETROIT

State
MI

Zip Code
48201

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
allied media projects

Occupation (for Individual)
writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.98

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 01 / 2022

Transaction ID : SA11AI.150028

Amount of Each Receipt this Period

27.00

☐ Memo Item

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

B. brown, adrienne, , ,

Mailing Address 3745 2ND AVE APT 2S

City
DETROIT

State
MI

Zip Code
48201

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
allied media projects

Occupation (for Individual)
writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

556.98

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 01 / 2022

Transaction ID : SA11AI.150151

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. Brumm, Nancy, , ,

Mailing Address 130 East 75th Street

City
New York

State
NY

Zip Code
10021

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not employed

Occupation (for Individual)
Not employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

238.42

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 01 / 2022

Transaction ID : SA11AI.150065

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

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

167.00

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

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

FOR LINE NUMBER: PAGE 9 OF 113

(check only one)

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

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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

A. Capeci, Jenna, , ,

Mailing Address 3554 80th ST APT 1

City

Jackson Heights

State

NY

Zip Code

11372

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Proteus Fund

Occupation (for Individual)

Nonprofit staff

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

326.42

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 01 / 2022

Transaction ID : SA11AI.149670

Amount of Each Receipt this Period

27.00

☐ Memo Item

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

B. Capeci, Jenna, , ,

Mailing Address 3554 80th ST APT 1

City

Jackson Heights

State

NY

Zip Code

11372

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Proteus Fund

Occupation (for Individual)

Nonprofit staff

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

346.42

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 13 / 2022

Transaction ID : SA11AI.150711

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

C. Capeci, Jenna, , ,

Mailing Address 3554 80th ST APT 1

City

Jackson Heights

State

NY

Zip Code

11372

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Proteus Fund

Occupation (for Individual)

Nonprofit staff

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

366.42

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 13 / 2022

Transaction ID : SA11AI.150735

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

67.00

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

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

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

FOR LINE NUMBER: PAGE 10 OF 113

(check only one)

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

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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

A. Cohen, Naomi, , ,

Mailing Address POB 39

City
Gap Mills

State
WV

Zip Code
24941

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
self employed

Occupation (for Individual)
businesswoman

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2247.38

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 06 / 2022

Transaction ID : SA11AI.150468

Amount of Each Receipt this Period

155.00

☐ Memo Item

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

B. Cohen, Naomi, , ,

Mailing Address POB 39

City
Gap Mills

State
WV

Zip Code
24941

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
self employed

Occupation (for Individual)
businesswoman

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2269.38

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 11 / 2022

Transaction ID : SA11AI.150628

Amount of Each Receipt this Period

22.00

☐ Memo Item

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

C. Collins, Jacqueline, , ,

Mailing Address 3995 Cherrywood Avenue

City
Los Angeles

State
CA

Zip Code
90008

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-employed

Occupation (for Individual)
Music Producer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

277.22

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 01 / 2022

Transaction ID : SA11AI.150279

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

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

212.00

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

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

FOR LINE NUMBER: PAGE 11 OF 113

(check only one)

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

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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

A. Crowell, Doug, , ,

Mailing Address 807 Bergen Street

City
Brooklyn

State
NY

Zip Code
11238

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 ▼

257.54

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 16 / 2022

Transaction ID : SA11AI.151110

Amount of Each Receipt this Period

257.54

☐ Memo Item

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

B. Deed, Kenneth, , ,

Mailing Address 107 Payer Ln

City
Mystic

State
CT

Zip Code
06355

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
none

Occupation (for Individual)
none

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

397.54

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 01 / 2022

Transaction ID : SA11AI.150296

Amount of Each Receipt this Period

50.19

☐ Memo Item

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

C. de Leon, Aya, , ,

Mailing Address 1700 Shattuck Ave. #296

City
Berkeley

State
CA

Zip Code
94709

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UC Berkeley

Occupation (for Individual)
Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

229.93

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 01 / 2022

Transaction ID : SA11AI.149812

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

357.73

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

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

FOR LINE NUMBER: PAGE 12 OF 113

(check only one)

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

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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

A. de Leon, Aya, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 1700 Shattuck Ave. #296 City Berkeley State CA Zip Code 94709 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) UC Berkeley Occupation (for Individual) Writer Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 256.93			Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 01 / 2022 Transaction ID : SA11AI.150243 Amount of Each Receipt this Period 27.00 ☐ Memo Item
B. Dodd, Anne, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 1151 N Quivey Hill Ln City Whitehall State NY Zip Code 12887 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) none Occupation (for Individual) none Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 346.04			Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 09 / 2022 Transaction ID : SA11AI.150589 Amount of Each Receipt this Period 50.00 ☐ Memo Item
C. Drew, Janet, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 15 avon ave City York State ME Zip Code 03909 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 211.10			Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 01 / 2022 Transaction ID : SA11AI.149827 Amount of Each Receipt this Period 13.00 ☐ Memo Item
SUBTOTAL of Receipts This Page (optional)..... ▶			90.00
TOTAL This Period (last page this line number only)..... ▶			

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

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

FOR LINE NUMBER: PAGE 13 OF 113

(check only one)

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

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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

A. Drew, Janet, , ,

Mailing Address 15 avon ave

City
York

State
ME

Zip Code
03909

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.10

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 01 / 2022

Transaction ID : SA11AI.149982

Amount of Each Receipt this Period

3.00

☐ Memo Item

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

B. Drew, Janet, , ,

Mailing Address 15 avon ave

City
York

State
ME

Zip Code
03909

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.60

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 01 / 2022

Transaction ID : SA11AI.150019

Amount of Each Receipt this Period

6.50

☐ Memo Item

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

C. Drew, Janet, , ,

Mailing Address 15 avon ave

City
York

State
ME

Zip Code
03909

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

233.10

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 03 / 2022

Transaction ID : SA11AI.150361

Amount of Each Receipt this Period

12.50

☐ Memo Item

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

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

22.00

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

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

FOR LINE NUMBER: PAGE 14 OF 113

(check only one)

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

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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

A. Ender, Lisa, , ,

Mailing Address 6856 Colton Blvd

City
Oakland

State
CA

Zip Code
94611

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sam Francisco DPH

Occupation (for Individual)
Senior Physical Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.93

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 19 / 2022

Transaction ID : SA11AI.150925

Amount of Each Receipt this Period

27.00

☐ Memo Item

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

B. Ettinger, Jonathan, , ,

Mailing Address 1202 P St NW Apt 1

City
Washington

State
DC

Zip Code
20005

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sayari

Occupation (for Individual)
Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

696.05

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 01 / 2022

Transaction ID : SA11AI.149443

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. Ettinger, Jonathan, , ,

Mailing Address 1202 P St NW Apt 1

City
Washington

State
DC

Zip Code
20005

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sayari

Occupation (for Individual)
Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

796.05

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 19 / 2022

Transaction ID : SA11AI.150932

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

227.00

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

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

FOR LINE NUMBER: PAGE 15 OF 113

(check only one)

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

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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

A. feinstein, nancy, , ,

Mailing Address 1438 josephine St

City
berkeley

State
CA

Zip Code
94703

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
management consultant

Occupation (for Individual)
self

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.95

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 01 / 2022

Transaction ID : SA11AI.149753

Amount of Each Receipt this Period

27.00

☐ Memo Item

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

B. Fletcher-Pacheco, Candice, , ,

Mailing Address 334 Huntington Avenue

City
Buffalo

State
NY

Zip Code
14214

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Crisis Services

Occupation (for Individual)
Development and Marketing Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.02

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 01 / 2022

Transaction ID : SA11AI.149433

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Fletcher-Pacheco, Candice, , ,

Mailing Address 334 Huntington Avenue

City
Buffalo

State
NY

Zip Code
14214

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Crisis Services

Occupation (for Individual)
Development and Marketing Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

398.02

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 19 / 2022

Transaction ID : SA11AI.150923

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

127.00

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

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

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

FOR LINE NUMBER: PAGE 16 OF 113

(check only one)

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

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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

A. Fox, Lynda, , ,

Mailing Address 19630 Juna Lane

City
Saratoga

State
CA

Zip Code
95070

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
none

Occupation (for Individual)
none

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

816.11

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 01 / 2022

Transaction ID : SA11AI.149482

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. Fox, Lynda, , ,

Mailing Address 19630 Juna Lane

City
Saratoga

State
CA

Zip Code
95070

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
none

Occupation (for Individual)
none

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.11

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 20 / 2022

Transaction ID : SA11AI.150967

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. Foy, Jayn, , ,

Mailing Address 3302 S. Charles St.

City
Seattle

State
WA

Zip Code
98143

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self

Occupation (for Individual)
Landscaping

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

356.80

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 06 / 2022

Transaction ID : SA11AI.150443

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

210.00

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

PAGE 17 OF 113

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

A. Foy, Jayn, , ,

Mailing Address 3302 S. Charles St.

City
SeattleState
WAZip Code
98143FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

371.80

Date of Receipt

M = M / D = D / Y = Y - Y - Y
06 / 10 / 2022

Transaction ID : SA11AI.150602

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

B. Foy, Jayn, , ,

Mailing Address 3302 S. Charles St.

City
SeattleState
WAZip Code
98143FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

386.80

Date of Receipt

M = M / D = D / Y = Y - Y - Y
06 / 10 / 2022

Transaction ID : SA11AI.150603

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

C. Harris, Barry, , ,

Mailing Address 1523 Woodland Drive

City
AshlandState
ORZip Code
97520FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

273.02

Date of Receipt

M = M / D = D / Y = Y - Y - Y
06 / 08 / 2022

Transaction ID : SA11AI.150515

Amount of Each Receipt this Period

25.00

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

55.00

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

FOR LINE NUMBER: PAGE 18 OF 113

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

A. Hodes, Peter, , ,

Mailing Address 5969 W 74th St.

City

Los Angeles

State

CA

Zip Code

90045

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary	☐ General
☐ Other (specify) ▼	

Aggregate Year-to-Date ▼

290.92

Date of Receipt

M = M / D = D / Y = Y - Y - Y
06 / 02 / 2022

Transaction ID : SA11AI.150345

Amount of Each Receipt this Period

54.00

☐ Memo Item

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

B. Hodes, Peter, , ,

Mailing Address 5969 W 74th St.

City

Los Angeles

State

CA

Zip Code

90045

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary	☐ General
☐ Other (specify) ▼	

Aggregate Year-to-Date ▼

300.92

Date of Receipt

M = M / D = D / Y = Y - Y - Y
06 / 11 / 2022

Transaction ID : SA11AI.150633

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. Holmes, Brooke, , ,

Mailing Address 469 West 152nd Street

City

New York

State

NY

Zip Code

10031

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Princeton

Occupation (for Individual)

Professor

Receipt For:

☐ Primary	☐ General
☐ Other (specify)	

Aggregate Year-to-Date ▼

476.79

Date of Receipt

M = M / D = D / Y = Y - Y - Y
06 / 01 / 2022

Transaction ID : SA11AI.150014

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

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

139.00

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

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

FOR LINE NUMBER: PAGE 19 OF 113

(check only one)

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

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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

A. Holmes, Brooke, , ,

Mailing Address 469 West 152nd Street

City
New York

State
NY

Zip Code
10031

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Princeton

Occupation (for Individual)
Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

482.79

Date of Receipt

M M / D D / Y Y Y Y
06 / 01 / 2022

Transaction ID : SA11AI.150131

Amount of Each Receipt this Period

6.00

☐ Memo Item

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

B. Holmes, Em, , ,

Mailing Address 2508 Grant St

City
Berkeley

State
CA

Zip Code
94703

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self

Occupation (for Individual)
Artist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.82

Date of Receipt

M M / D D / Y Y Y Y
06 / 22 / 2022

Transaction ID : SA11AI.151081

Amount of Each Receipt this Period

27.00

☐ Memo Item

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

C. Keenan, Lauren, , ,

Mailing Address 22 Paseo Cuarto

City
Salinas

State
CA

Zip Code
93908

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not employed

Occupation (for Individual)
Not employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 13 / 2022

Transaction ID : SA11AI.150700

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

43.00

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

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

FOR LINE NUMBER: PAGE 20 OF 113

(check only one)

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

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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

A. Keenan, Lauren, , ,

Mailing Address 22 Paseo Cuarto

City
Salinas

State
CA

Zip Code
93908

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Not employed

Occupation (for Individual)

Not employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 13 / 2022

Transaction ID : SA11AI.150721

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. Keenan, Lauren, , ,

Mailing Address 22 Paseo Cuarto

City
Salinas

State
CA

Zip Code
93908

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Not employed

Occupation (for Individual)

Not employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 13 / 2022

Transaction ID : SA11AI.150724

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. Kern, Marilyn, , ,

Mailing Address 551 S. Paseo Del Cobre

City
Green Valley

State
AZ

Zip Code
85614

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

316.84

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 02 / 2022

Transaction ID : SA11AI.150337

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

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

60.00

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

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

FOR LINE NUMBER: PAGE 21 OF 113

(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)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

A. Khan, Scherezade, , ,

Mailing Address 57 Highland Road

City
Somerville

State
MA

Zip Code
02144

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Wistia

Occupation (for Individual)

Data Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.86

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 13 / 2022

Transaction ID : SA11AI.150715

Amount of Each Receipt this Period

27.00

☐ Memo Item

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

B. Kilpatrick, Emil, , ,

Mailing Address 11101 Holiday Hills Drive

City
Rogers

State
AR

Zip Code
72756

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Not employed

Occupation (for Individual)

Not employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.04

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 11 / 2022

Transaction ID : SA11AI.150637

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. King, Dawn, , ,

Mailing Address 112 Main St.

City
Putney

State
VT

Zip Code
05346

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

625.25

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 11 / 2022

Transaction ID : SA11AI.150649

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

87.00

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

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

A. King, Marjorie, , ,

Mailing Address 3000 E. Linden St.

City
Tucson

State
AZ

Zip Code
85716

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
retired

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.93

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 20 / 2022

Transaction ID : SA11AI.150978

Amount of Each Receipt this Period

27.00

☐ Memo Item

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

B. Koh, Yejoon, , ,

Mailing Address 20 Miles Road

City
Claymont

State
DE

Zip Code
19703

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Incyte

Occupation (for Individual)
Editor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

718.71

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 01 / 2022

Transaction ID : SA11AI.149833

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. krasucki, addy, , ,

Mailing Address 9171 Grange Hill Rd

City
New Hartford

State
NY

Zip Code
13413

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Trader Joe's

Occupation (for Individual)
crew

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

298.02

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 01 / 2022

Transaction ID : SA11AI.149865

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

127.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

A. Lester, Stephen, , ,

Mailing Address 1478 S Prairie Ave Unit F

City
Chicago

State
IL

Zip Code
60605

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Musician

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.84

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 16 / 2022

Transaction ID : SA11AI.150810

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

B. Lindstrom, Anna Maria, , ,

Mailing Address 28 Cromwell Road

City
Monroe

State
NY

Zip Code
10950

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self

Occupation (for Individual)

IT Security Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.28

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 22 / 2022

Transaction ID : SA11AI.151056

Amount of Each Receipt this Period

8.00

☐ Memo Item

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

C. Lindstrom, Anna Maria, , ,

Mailing Address 28 Cromwell Road

City
Monroe

State
NY

Zip Code
10950

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self

Occupation (for Individual)

IT Security Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

212.78

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 22 / 2022

Transaction ID : SA11AI.151058

Amount of Each Receipt this Period

7.50

☐ Memo Item

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

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

55.50

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

A. Lubow, Judy, , ,

Mailing Address 106 granada Court

City
Longmont

State
CO

Zip Code
80504

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
rtd

Occupation (for Individual)
board member

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 20 / 2022

Transaction ID : SA11AI.151001

Amount of Each Receipt this Period

400.00

☐ Memo Item

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

B. Lutterbie, John, , ,

Mailing Address 79 HEMPSTEAD AVE

City

MILLER PLACE

State
NY

Zip Code
11764

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Stony Brook University

Occupation (for Individual)
Teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

413.34

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 05 / 2022

Transaction ID : SA11AI.150438

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

C. Lutterbie, John, , ,

Mailing Address 79 HEMPSTEAD AVE

City

MILLER PLACE

State
NY

Zip Code
11764

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Stony Brook University

Occupation (for Individual)
Teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

425.84

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 11 / 2022

Transaction ID : SA11AI.150653

Amount of Each Receipt this Period

12.50

☐ Memo Item

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

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

452.50

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

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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

A. Malloy, Athena, , ,

Mailing Address 323 Prospect Ave

City
Brooklyn

State
NY

Zip Code
11215

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self

Occupation (for Individual)
Massage therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.42

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 01 / 2022

Transaction ID : SA11AI.149757

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

B. Mangla, Kuldip, , ,

Mailing Address 7 George street

City
Fairport

State
NY

Zip Code
14450

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not employed

Occupation (for Individual)
Not employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

595.21

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 01 / 2022

Transaction ID : SA11AI.149880

Amount of Each Receipt this Period

27.00

☐ Memo Item

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

C. Mann, Marion, , ,

Mailing Address 266 Beechwood Drive

City
Rosemont

State
PA

Zip Code
19010

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
none

Occupation (for Individual)
not employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

316.84

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 01 / 2022

Transaction ID : SA11AI.150273

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

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

107.00

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

A. McCall, Leslie, , ,

Mailing Address 450 Clinton St.

City
Brooklyn

State
NY

Zip Code
11231

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

City University of New York

Occupation (for Individual)

Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1079.20

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 18 / 2022

Transaction ID : SA11AI.150877

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. McLaughlin, Joe, , ,

Mailing Address 93 Pinewood Ave

City
Albany

State
NY

Zip Code
12208

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Citizen Action of New York

Occupation (for Individual)

Data

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.24

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 09 / 2022

Transaction ID : SA11AI.150586

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. McLaughlin, Joe, , ,

Mailing Address 93 Pinewood Ave

City
Albany

State
NY

Zip Code
12208

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Citizen Action of New York

Occupation (for Individual)

Data

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

490.24

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 18 / 2022

Transaction ID : SA11AI.150887

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

70.00

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

A. Mercado, Cecilia, , ,

Mailing Address 17 Greystone Court

City
Burlington

State
MA

Zip Code
01803

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Raytheon

Occupation (for Individual)

Software Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.02

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 13 / 2022

Transaction ID : SA11AI.150696

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. Mercado, Cecilia, , ,

Mailing Address 17 Greystone Court

City
Burlington

State
MA

Zip Code
01803

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Raytheon

Occupation (for Individual)

Software Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.02

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 13 / 2022

Transaction ID : SA11AI.150720

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. Mitchell, Marvin, , ,

Mailing Address 249 west 136th street apt 4

City
New York

State
NY

Zip Code
10030

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NBCUniversal

Occupation (for Individual)

Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 05 / 2022

Transaction ID : SA11AI.150439

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

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

250.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

A. Nnaemeka, Sochie, , ,

Mailing Address 1423 Mamaroneck Avenue 1E

 City
 Mamaroneck

 State
 NY

 Zip Code
 10543

 FEC ID number of contributing
 federal political committee.

 C

 Name of Employer (for Individual)
 CPD

 Occupation (for Individual)
 Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

 854.75

Date of Receipt

 M M / D D / Y Y Y Y
 06 / 16 / 2022

Transaction ID : SA11AI.151108

Amount of Each Receipt this Period

 854.75
☐ Memo Item

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

B. Norwood, Dael, , ,

Mailing Address 803 Baylor Dr

 City
 Newark

 State
 DE

 Zip Code
 19711

 FEC ID number of contributing
 federal political committee.

 C

 Name of Employer (for Individual)
 University of Delaware

 Occupation (for Individual)
 Historian

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

 221.01

Date of Receipt

 M M / D D / Y Y Y Y
 06 / 01 / 2022

Transaction ID : SA11AI.150068

Amount of Each Receipt this Period

 25.00
☐ Memo Item

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

C. Park, Daniel, , ,

Mailing Address 2701 W Girard Ave

 City
 Philadelphia

 State
 PA

 Zip Code
 19130

 FEC ID number of contributing
 federal political committee.

 C

 Name of Employer (for Individual)
 Self and U.S. Federation of Worker Coo

 Occupation (for Individual)
 Artist Administrator Organizer Facilit

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

 298.02

Date of Receipt

 M M / D D / Y Y Y Y
 06 / 01 / 2022

Transaction ID : SA11AI.150017

Amount of Each Receipt this Period

 50.00
☐ Memo Item

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

 929.75

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

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

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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

A. Parry, Elizabeth, , ,

Mailing Address 2536 Lurting Avenue

City
Bronx

State
NY

Zip Code
10469

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RILM Abstracts

Occupation (for Individual)
editor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.62

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 01 / 2022

Transaction ID : SA11AI.149437

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. Parry, Elizabeth, , ,

Mailing Address 2536 Lurting Avenue

City
Bronx

State
NY

Zip Code
10469

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RILM Abstracts

Occupation (for Individual)
editor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.62

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 10 / 2022

Transaction ID : SA11AI.150624

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. Parry, Elizabeth, , ,

Mailing Address 2536 Lurting Avenue

City
Bronx

State
NY

Zip Code
10469

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RILM Abstracts

Occupation (for Individual)
editor

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

252.62

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 19 / 2022

Transaction ID : SA11AI.150926

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

45.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

A. Peck, Kraig, , ,

Mailing Address 16310 170th Ave NE

City
WoodinvilleState
WAZip Code
98072FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5079.20

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 01 / 2022

Transaction ID : SA11AI.150286

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. Pfordresher, Catherine, , ,

Mailing Address 400 Third St.

City
BrooklynState
NYZip Code
11215FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.20

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 03 / 2022

Transaction ID : SA11AI.150374

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. Quinn, Garrett, , ,

Mailing Address 2608 Great Oaks Parkway

City
AustinState
TXZip Code
78756FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
selfOccupation (for Individual)
Architectural Designer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 01 / 2022

Transaction ID : SA11AI.149420

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

1020.00

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

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

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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

A. Ribe, Susan, , ,

Mailing Address 12820 Matey Rd

City
Silver Spring

State
MD

Zip Code
20906

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Clean Choice Energy

Occupation (for Individual)
Data Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

920.37

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 01 / 2022

Transaction ID : SA11AI.149807

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

B. robins, paul, , ,

Mailing Address 2424 Oregon St

City
Berkeley

State
CA

Zip Code
94705

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.93

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 01 / 2022

Transaction ID : SA11AI.149580

Amount of Each Receipt this Period

27.00

☐ Memo Item

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

C. robins, paul, , ,

Mailing Address 2424 Oregon St

City
Berkeley

State
CA

Zip Code
94705

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

237.93

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 21 / 2022

Transaction ID : SA11AI.151030

Amount of Each Receipt this Period

27.00

☐ Memo Item

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

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

254.00

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

Use separate schedule(s)
for each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

A. Roosevelt III, F D, , ,

Mailing Address 404 Riverside Dr

City
New York

State
NY

Zip Code
10025

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Metropolitan College of New York

Occupation (for Individual)
college professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

596.05

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 01 / 2022

Transaction ID : SA11AI.150205

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. Royce, Sarah, , ,

Mailing Address 100 Hazel lane

City
Piedmont

State
CA

Zip Code
94611

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CA dept health services

Occupation (for Individual)
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

782.21

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 16 / 2022

Transaction ID : SA11AI.150825

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Sandler, Julie, , ,

Mailing Address 5624 Kennett Pike

City
Wilmington

State
DE

Zip Code
19807

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not employed

Occupation (for Individual)
Not employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

696.05

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 11 / 2022

Transaction ID : SA11AI.150635

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

250.00

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

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

FOR LINE NUMBER: PAGE 33 OF 113

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

A. Scher, Hagar, , ,

Mailing Address 1807 Blake Street

City
Berkeley

State
CA

Zip Code
94703

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Apple

Occupation (for Individual)

Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.93

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 19 / 2022

Transaction ID : SA11AI.150922

Amount of Each Receipt this Period

27.00

☐ Memo Item

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

B. Schmidtke, Edwin, , ,

Mailing Address 5451 Morella Ave

City
Valley Village

State
CA

Zip Code
91607

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
none

Occupation (for Individual)
none

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.01

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 01 / 2022

Transaction ID : SA11AI.149614

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. Schmidtke, Edwin, , ,

Mailing Address 5451 Morella Ave

City
Valley Village

State
CA

Zip Code
91607

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
none

Occupation (for Individual)
none

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

249.01

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 22 / 2022

Transaction ID : SA11AI.151072

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

77.00

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

A. Seargeany, Charles, , ,

Mailing Address 2939 E Ocean Blvd

City
Long Beach

State
CA

Zip Code
90803

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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 06 / 2022

Transaction ID : SA11AI.151121

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

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

B. Sheppard, Elizabeth, , ,

Mailing Address 2007 SE Bybee Blvd.

City
Portland

State
OR

Zip Code
97202

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.80

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 08 / 2022

Transaction ID : SA11AI.150511

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. Sheppard, Elizabeth, , ,

Mailing Address 2007 SE Bybee Blvd.

City
Portland

State
OR

Zip Code
97202

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

213.80

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 22 / 2022

Transaction ID : SA11AI.151076

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

270.00

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

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for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

A. silverman, bernice, , ,

Mailing Address 303 west 6 6street

City
new york

State
NY

Zip Code
10023

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.44

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 01 / 2022

Transaction ID : SA11AI.149970

Amount of Each Receipt this Period

27.00

☐ Memo Item

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

B. silverman, bernice, , ,

Mailing Address 303 west 6 6street

City
new york

State
NY

Zip Code
10023

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.44

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 01 / 2022

Transaction ID : SA11AI.150120

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. silverman, bernice, , ,

Mailing Address 303 west 6 6street

City
new york

State
NY

Zip Code
10023

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

352.44

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 09 / 2022

Transaction ID : SA11AI.150593

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

87.00

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

A. silverman, bernice, , ,

Mailing Address 303 west 6 6street

City
new york

State
NY

Zip Code
10023

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

367.44

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 18 / 2022

Transaction ID : SA11AI.150869

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

B. Smith, Diane, , ,

Mailing Address 64 Browns Lane

City
Old Lyme

State
CT

Zip Code
06371

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

USPS

Occupation (for Individual)

Post master

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.42

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 01 / 2022

Transaction ID : SA11AI.149570

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

C. Smith, Theodore, , ,

Mailing Address 465 South 15th Street

City
San Jose

State
CA

Zip Code
95112

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

self

Occupation (for Individual)

environmental consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

254.95

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 01 / 2022

Transaction ID : SA11AI.149841

Amount of Each Receipt this Period

27.00

☐ Memo Item

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

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

82.00

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

A. Smurr, gretchen, , ,

Mailing Address 1312 Jimeno Lane

City
Woodland

State
CA

Zip Code
95695

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WJUSD

Occupation (for Individual)
teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.86

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 16 / 2022

Transaction ID : SA11AI.150828

Amount of Each Receipt this Period

27.00

☐ Memo Item

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

B. Spurr, Charles, , ,

Mailing Address 139 Broadway St

City
Wakefield

State
MA

Zip Code
01880

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
kayak.com

Occupation (for Individual)
Software Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

584.20

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 01 / 2022

Transaction ID : SA11AI.149905

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. Spurr, Charles, , ,

Mailing Address 139 Broadway St

City
Wakefield

State
MA

Zip Code
01880

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
kayak.com

Occupation (for Individual)
Software Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

684.20

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 14 / 2022

Transaction ID : SA11AI.150770

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

227.00

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

A. Storace, Patricia, , ,

Mailing Address 50 West Ninth Street

City
New York

State
NY

Zip Code
10011

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Freelance

Occupation (for Individual)

Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.07

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 01 / 2022

Transaction ID : SA11AI.149645

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. Walker, Jennifer, , ,

Mailing Address 16 Granville St # 2

City

Dorchester Center

State
MA

Zip Code
02124

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self

Occupation (for Individual)

Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.84

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 04 / 2022

Transaction ID : SA11AI.150397

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

C. Warren, Chris, , ,

Mailing Address 5244 36th Ave S

City

Minneapolis

State
MN

Zip Code
55417

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Brightcove

Occupation (for Individual)

Computer Programmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.02

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 12 / 2022

Transaction ID : SA11AI.150675

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

165.00

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

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

A. Warren, Nathaniel, , ,

Mailing Address 2808 W Mallon Ave

City
Spokane

State
WA

Zip Code
99201

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
OCHIN

Occupation (for Individual)
Research Associate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.84

Date of Receipt

06 / 13 / 2022

Transaction ID : SA11AI.150695

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

B. Warren, Nathaniel, , ,

Mailing Address 2808 W Mallon Ave

City
Spokane

State
WA

Zip Code
99201

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
OCHIN

Occupation (for Individual)
Research Associate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

334.84

Date of Receipt

06 / 13 / 2022

Transaction ID : SA11AI.150719

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

C. Waters, George, , ,

Mailing Address 72 New Haven Ave, Apt B

City
Derby

State
CT

Zip Code
06418

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 ▼

313.03

Date of Receipt

06 / 25 / 2022

Transaction ID : SA11AI.151098

Amount of Each Receipt this Period

80.49

☐ Memo Item

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

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

160.49

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

A. Williams, Margaret, , ,

Mailing Address 4 Union St

City
Topsham

State
ME

Zip Code
04086

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Idexx labs

Occupation (for Individual)

Compliance specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

40039.60

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 06 / 2022

Transaction ID : SA11AI.150452

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

B. Wofsy, Judith, , ,

Mailing Address 821 Ramona Ave

City
Albany

State
CA

Zip Code
94706

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.04

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 06 / 2022

Transaction ID : SA11AI.150461

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Zaslavsky, Thomas, , ,

Mailing Address 11 Rotary Ave.

City
Binghamton

State
NY

Zip Code
13905

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SUNY

Occupation (for Individual)
Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

278.42

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 01 / 2022

Transaction ID : SA11AI.149602

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

95.00

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

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

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

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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

A. Zaslavsky, Thomas, , ,

Mailing Address 11 Rotary Ave.

City
Binghamton

State
NY

Zip Code
13905

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SUNY

Occupation (for Individual)
Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

318.42

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 22 / 2022

Transaction ID : SA11AI.151060

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

B. Zassenhaus, Geoffrey, , ,

Mailing Address 25 Eagle Nest Road

City
Morristown

State
NJ

Zip Code
07960

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Novartis

Occupation (for Individual)
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.86

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 16 / 2022

Transaction ID : SA11AI.150803

Amount of Each Receipt this Period

27.00

☐ 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

Amount of Each Receipt this Period

☐ Memo Item

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

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

67.00

7681.97

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

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

FOR LINE NUMBER: PAGE 42 OF 113
(check only one)

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

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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

A. Middle Seat

Mailing Address 1734 Connecticut Ave NW

City
Washington

State
DC

Zip Code
20009

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 ▼

15745.82

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 17 / 2022

Transaction ID : SA15.151315

Amount of Each Receipt this Period

15745.82

☐ Memo Item
Refund

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

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

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

15745.82

15745.82

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

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

FOR LINE NUMBER: PAGE 43 OF 113

(check only one)

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

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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

A. Accountable Justice Action Fund

Mailing Address 314 Lytton Ave

City
Palo Alto

State
CA

Zip Code
94301

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 ▼

150000.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 29 / 2022

Transaction ID : SA17.151124

Amount of Each Receipt this Period

150000.00

☐ Memo Item
Contribution

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

B. COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

Mailing Address 501 THIRD STREET, NW

City
WASHINGTON

State
DC

Zip Code
20001

FEC ID number of contributing
federal political committee.

C C00002089

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

60000.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 06 / 2022

Transaction ID : SA17.151138

Amount of Each Receipt this Period

10000.00

☐ Memo Item
Contribution to Non-Contribution Account

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

c. Cook County College Teachers

Mailing Address 1901 W Carroll Ave

City
Chicago

State
IL

Zip Code
60612

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 ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 21 / 2022

Transaction ID : SA17.151141

Amount of Each Receipt this Period

5000.00

☐ Memo Item
Contribution to Non-Contribution Account

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

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

165000.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 44 OF 113

(check only one)

☐ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☒ 17
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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

A. DEMAND JUSTICE PAC

Mailing Address 611 PENNSYLVANIA AVE SE
#192

City
WASHINGTON

State
DC

Zip Code
20003

FEC ID number of contributing
federal political committee.

C C00760827

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 27 / 2022

Transaction ID : SA17.151134

Amount of Each Receipt this Period

50000.00

☐ Memo Item

Contribution to Non-Contribution Account

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

B. hayling, crystal, , ,

Mailing Address 103 castilian way

City

san mateo

State
CA

Zip Code
94402

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tao Rising

Occupation (for Individual)
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 27 / 2022

Transaction ID : SA17.151144

Amount of Each Receipt this Period

15000.00

☐ Memo Item

Contribution to Non-Contribution Account

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

C. J STREET

Mailing Address PO BOX 66073

City

WASHINGTON

State
DC

Zip Code
20035

FEC ID number of contributing
federal political committee.

C C90014028

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

124000.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 16 / 2022

Transaction ID : SA17.151139

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Contribution to Non-Contribution Account

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

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

70000.00

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

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

FOR LINE NUMBER: PAGE 45 OF 113

(check only one)

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

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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

A. J STREET

Mailing Address PO BOX 66073

City
WASHINGTON

State
DC

Zip Code
20035

FEC ID number of contributing
federal political committee.

C C90014028

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

178254.18

Date of Receipt

06 / **17** / **2022**

Transaction ID : SA17.151133

Amount of Each Receipt this Period

54254.18

☐ Memo Item

Contribution to Non-Contribution Account

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

B. Jurvetson, Karla, , ,

Mailing Address 27200 Altamont Road

City
Los Altos

State
CA

Zip Code
94022

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 ▼

1000225.00

Date of Receipt

06 / **13** / **2022**

Transaction ID : SA17.151127

Amount of Each Receipt this Period

1000000.00

☐ Memo Item

Contribution to Non-Contribution Committee

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

C. Linsco

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 ▼

5000.00

Date of Receipt

06 / **03** / **2022**

Transaction ID : SA17.151358

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Contribution to Non-Contribution Account

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

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

1059254.18

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

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

FOR LINE NUMBER: PAGE 46 OF 113

(check only one)

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

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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

A. MALCOLM PAC

Mailing Address P.O. BOX 22395

City
PHILADELPHIA

State
PA

Zip Code
19110

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 ▼

35888.93

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 08 / 2022

Transaction ID : SA17.151123

Amount of Each Receipt this Period

20000.00

☐ Memo Item

Payment for campaign manager

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

B. Sajid Khan for District Attorney

Mailing Address 1346 The alameda

City
San Jose

State
CA

Zip Code
95126

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 ▼

42271.92

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 06 / 2022

Transaction ID : SA17.151149

Amount of Each Receipt this Period

7848.08

☐ Memo Item

Contribution to Non-Contribution Account

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

C. Sajid Khan for District Attorney

Mailing Address 1346 The alameda

City
San Jose

State
CA

Zip Code
95126

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 ▼

46274.44

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 27 / 2022

Transaction ID : SA17.151143

Amount of Each Receipt this Period

4002.52

☐ Memo Item

Contribution to Non-Contribution Account

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

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

31850.60

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

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

FOR LINE NUMBER: PAGE 47 OF 113
(check only one)

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

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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

A. SEIU Healthcare

Mailing Address 1500 N 2nd Street

City
Harrisburg

State
PA

Zip Code
17102

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 ▼

150000.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 10 / 2022

Transaction ID : SA17.151129

Amount of Each Receipt this Period

100000.00

☐ Memo Item

Contribution to Non-Contribution Committee

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

B. Smith, Sonjia, , ,

Mailing Address 815 Broomley Rd

City
Charlottesville

State
VA

Zip Code
22901

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 ▼

50000.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 06 / 2022

Transaction ID : SA17.151145

Amount of Each Receipt this Period

50000.00

☐ Memo Item

Contribution to Non-Contribution Account

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

C. Soyo Consultants

Mailing Address 111 Gransview Ave

City
Pittsburgh

State
PA

Zip Code
15211

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 06 / 2022

Transaction ID : SA17.151147

Amount of Each Receipt this Period

500.00

☐ Memo Item

Contribution to Non-Contribution Account

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

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

150500.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 OF 113
(check only one)

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

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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

A. THE PEOPLE'S LOBBY

Mailing Address PO BOX 15123

City
CHICAGO

State
IL

Zip Code
60615

FEC ID number of contributing
federal political committee.

C

C90015868

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

67000.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 17 / 2022

Transaction ID : SA17.151131

Amount of Each Receipt this Period

67000.00

☐ Memo Item

Contribution to Non-Contribution Account

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

B. WAY TO LEAD PAC

Mailing Address 2828 N CENTRAL AVE
SUITE 1014

City
PHOENIX

State
AZ

Zip Code
85004

FEC ID number of contributing
federal political committee.

C

C00686832

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1350000.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 07 / 2022

Transaction ID : SA17.151128

Amount of Each Receipt this Period

150000.00

☐ Memo Item

Contribution to Non-Contribution Committee

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

C. Working Families Organization

Mailing Address 77 Sands Street

City
Brooklyn

State
NY

Zip Code
11201

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 ▼

380760.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 02 / 2022

Transaction ID : SA17.151136

Amount of Each Receipt this Period

40000.00

☐ Memo Item

Contribution to Non-Contribution Account

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

257000.00

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

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 49 OF 113

(check only one)

☐ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☒ 17
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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

A. Working Families Organization

Mailing Address 77 Sands Street

City
BrooklynState
NYZip Code
11201FEC 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 ▼

420760.00

Date of Receipt

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

Transaction ID : SA17.151137

Amount of Each Receipt this Period

40000.00

☐ Memo Item

Contribution to Non-Contribution Account

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

B. Working Families Organization

Mailing Address 77 Sands Street

City
BrooklynState
NYZip Code
11201FEC 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 ▼

495760.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	5		2	0	2	2

Transaction ID : SA17.151126

Amount of Each Receipt this Period

75000.00

☐ Memo Item

Contribution to Non-Contribution NYS IE Account

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

Amount of Each Receipt this Period

☐ Memo Item

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

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

115000.00

1848604.78

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

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

FOR LINE NUMBER:
(check only one)

PAGE 50 OF 113

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

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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Ackerman, Sara, , ,

Mailing Address 295 15th St

City
Brooklyn

State
NY

Zip Code
11215

Purpose of Disbursement
April Payroll Non-Contribution Account

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 02 / 2022

FEC Identification Number

C Transaction ID : SB21B.15117

Amount of Each Disbursement this Period

873.89

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Act Blue

Mailing Address 366 Summer St

City
Somerville

State
MA

Zip Code
02144

Purpose of Disbursement
Payment processor fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 30 / 2022

FEC Identification Number

C Transaction ID : SB21B.15131

Amount of Each Disbursement this Period

1261.29

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Amalgamated Bank

Mailing Address 275 Seventh Avenue

City
New York

State
NY

Zip Code
10003

Purpose of Disbursement
Bank Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 24 / 2022

FEC Identification Number

C Transaction ID : SB21B.15115

Amount of Each Disbursement this Period

40.00

☐ Memo Item

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

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

1301.29

X	21b		22		23		26		27
	28a		28b		28c		29		30b

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

113.35

Memo Item

736.49

Memo Item

449.92

X Memo Item

849.84

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

PAGE 52 OF 113

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

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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Blaettler, Charles, , ,

Mailing Address

City

State

Zip Code

Purpose of Disbursement

April Payroll Non-Contribution NYS IE Account

Candidate Name

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	6			0	2			2	0	2	2		

FEC Identification Number

C**Transaction ID : SB21B.15119**

Amount of Each Disbursement this Period

5330.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Blaettler, Charlie, , ,

Mailing Address 4 Briarwood Lane

City

Morristown

State

NJ

Zip Code

07960

Purpose of Disbursement

Reimbursement

Candidate Name

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	6			1	7			2	0	2	2		

FEC Identification Number

C**Transaction ID : SB21B.15120**

Amount of Each Disbursement this Period

4097.74

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Blay, Rudolph, , ,

Mailing Address 81 Prospect St

City

Brooklyn

State

NY

Zip Code

11201

Purpose of Disbursement

Personnel

Candidate Name

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	6			0	2			2	0	2	2		

FEC Identification Number

C**Transaction ID : SB21B.15133**

Amount of Each Disbursement this Period

2910.59

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

4097.74

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

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

FOR LINE NUMBER:
(check only one)

PAGE 53 OF 113

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

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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Blay, Rudolph, , ,

Mailing Address 81 Prospect St

City
Brooklyn

State
NY

Zip Code
11201

Purpose of Disbursement
Personnel from Non-Contribution Account

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 02 / 2022

FEC Identification Number

C Transaction ID : SB21B.15134

Amount of Each Disbursement this Period

862.40

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Blay, Rudolph, , ,

Mailing Address 81 Prospect St

City
Brooklyn

State
NY

Zip Code
11201

Purpose of Disbursement
Personnel from NYS IE Account

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 02 / 2022

FEC Identification Number

C Transaction ID : SB21B.15135

Amount of Each Disbursement this Period

556.96

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Clifford, Vanessa, , ,

Mailing Address 208 Wilder Street

City
Philadelphia

State
PA

Zip Code
19147

Purpose of Disbursement
April Payroll

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 02 / 2022

FEC Identification Number

C Transaction ID : SB21B.15116

Amount of Each Disbursement this Period

8389.55

☒ Memo Item

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

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

0.00

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

PAGE 54 OF 113

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

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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Community Labor Administrative Services

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		02		2022

Mailing Address 77 Sands Street
6th FloorCity
BrooklynState
NYZip Code
11201Purpose of Disbursement
April Payroll

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.15119

Amount of Each Disbursement this Period

13343.42

☐

Memo Item

Full Name (Last, First, Middle Initial)

B. Community Labor Administrative Services

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		02		2022

Mailing Address 77 Sands Street
6th FloorCity
BrooklynState
NYZip Code
11201Purpose of Disbursement
April Payroll Non-Contribution Account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.15119

Amount of Each Disbursement this Period

28768.20

☐

Memo Item

Full Name (Last, First, Middle Initial)

C. Community Labor Administrative Services

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		02		2022

Mailing Address 77 Sands Street
6th FloorCity
BrooklynState
NYZip Code
11201Purpose of Disbursement
April Payroll Non-Contribution NYS IE Account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.15119

Amount of Each Disbursement this Period

5330.00

☐

Memo Item

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

47441.62

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

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

FOR LINE NUMBER:
(check only one)

PAGE 55 OF 113

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

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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Community Labor Administrative Services

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 02 / 2022

Mailing Address 77 Sands Street
6th Floor

City
Brooklyn

State
NY

Zip Code
11201

Purpose of Disbursement
Personnel

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.15132

Amount of Each Disbursement this Period

14066.59

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Community Labor Administrative Services

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 02 / 2022

Mailing Address 77 Sands Street
6th Floor

City
Brooklyn

State
NY

Zip Code
11201

Purpose of Disbursement
Personnel

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.15132

Amount of Each Disbursement this Period

5744.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Community Labor Administrative Services

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 02 / 2022

Mailing Address 77 Sands Street
6th Floor

City
Brooklyn

State
NY

Zip Code
11201

Purpose of Disbursement
Personnel

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.15132

Amount of Each Disbursement this Period

19387.00

☐ Memo Item

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

39197.59

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)

PAGE 56 OF 113

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

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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Community Labor Administrative Services

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 02 / 2022

Mailing Address 77 Sands Street
6th Floor

City
Brooklyn

State
NY

Zip Code
11201

Purpose of Disbursement
Personnel

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.15133

Amount of Each Disbursement this Period

3710.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Cordeiro, Matthew, , ,

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 02 / 2022

Mailing Address 100 E Rosemary Rd.

City
Wildwood Crest

State
NJ

Zip Code
08260

Purpose of Disbursement
April Payroll Non-Contribution Account

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.15118

Amount of Each Disbursement this Period

1386.82

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Dinkin, Joseph, , ,

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 02 / 2022

Mailing Address

City

State

Zip Code

Purpose of Disbursement
April Payroll Non-Contribution Account

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.15118

Amount of Each Disbursement this Period

1929.50

☒ Memo Item

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

3710.00

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 PageFOR LINE NUMBER:
(check only one)

PAGE 57 OF 113

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

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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Duffey, Robert, , ,

Date of Disbursement

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

Mailing Address 68 3rd Place

City
BrooklynState
NYZip Code
11231Purpose of Disbursement
April Payroll

Candidate Name

Category/
Type
Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State: District:

FEC Identification Number

C**Transaction ID : SB21B.15115**

Amount of Each Disbursement this Period

447.58

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Easterday, Dylan, , ,

Date of Disbursement

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

Mailing Address 1766 Amsterdam Avenue

City
New YorkState
NYZip Code
10031Purpose of Disbursement
April Payroll

Candidate Name

Category/
Type
Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State: District:

FEC Identification Number

C**Transaction ID : SB21B.15116**

Amount of Each Disbursement this Period

1297.84

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Farrell, Lindsay, , ,

Date of Disbursement

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

Mailing Address 169 Still Road

City
West HartfordState
CTZip Code
06117Purpose of Disbursement
April Payroll Non-Contribution Account

Candidate Name

Category/
Type
Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State: District:

FEC Identification Number

C**Transaction ID : SB21B.15118**

Amount of Each Disbursement this Period

1654.64

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

0.00

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

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

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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Fertik, Edward, , ,

Mailing Address 829 Quincy St. NW #414

City
WashingtonState
DCZip Code
20011Purpose of Disbursement
April Payroll

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 02 / 2022

FEC Identification Number

C

Transaction ID : SB21B.15115

Amount of Each Disbursement this Period

118.01

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Financial Innovations

Mailing Address One Weingeroff Boulevard

City
CranstonState
RIZip Code
02910Purpose of Disbursement
Merchandise

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 01 / 2022

FEC Identification Number

C

Transaction ID : SB21B.15119

Amount of Each Disbursement this Period

1492.27

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Financial Innovations

Mailing Address One Weingeroff Boulevard

City
CranstonState
RIZip Code
02910Purpose of Disbursement
Merchandise

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 01 / 2022

FEC Identification Number

C

Transaction ID : SB21B.15124

Amount of Each Disbursement this Period

3927.93

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

5420.20

X	21b		22		23		26		27
	28a		28b		28c		29		30b

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

PAGE 60 OF 113

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

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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Hurley, Jordan, , ,

Mailing Address 34-36 Howe Street

City
BostonState
MAZip Code
02125Purpose of Disbursement
Personnel from NYS IE Account

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : SB21B.15135**

Amount of Each Disbursement this Period

360.74

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Johnson, Amanda, , ,

Mailing Address 69 Clifton Place

City
BrooklynState
NYZip Code
11238Purpose of Disbursement
April Payroll Non-Contribution Account

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : SB21B.15117**

Amount of Each Disbursement this Period

1095.27

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Kamen, Ari, , ,Mailing Address 398 Graham Ave
#2City
BrooklynState
NYZip Code
11211Purpose of Disbursement
April Payroll

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : SB21B.15111**

Amount of Each Disbursement this Period

196.08

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

0.00

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)

PAGE 61 OF 113

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

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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Knox, Jennifer, , ,

Mailing Address 94 Webster St NE
Apt 5

City
Washington

State
DC

Zip Code
20011

Purpose of Disbursement
April Payroll Non-Contribution Account

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 02 / 2022

FEC Identification Number

C

Transaction ID : SB21B.15118

Amount of Each Disbursement this Period

1266.90

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Lentz, Braeden, , ,

Mailing Address 792 COLUMBUS AVE APT 17G

City
New York

State
NY

Zip Code
10025

Purpose of Disbursement
April Payroll Non-Contribution Account

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 02 / 2022

FEC Identification Number

C

Transaction ID : SB21B.15118

Amount of Each Disbursement this Period

1495.07

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Leon, Amaris, , ,

Mailing Address 100 Florida Ave NW

City
Washington

State
DC

Zip Code
20001

Purpose of Disbursement
April Payroll Non-Contribution Account

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 02 / 2022

FEC Identification Number

C

Transaction ID : SB21B.15118

Amount of Each Disbursement this Period

8407.57

☒ Memo Item

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

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

0.00

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

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☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Lira, Pedro, , ,

Date of Disbursement

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

Mailing Address 9010 Markville Drive

City
DALLASState
TXZip Code
75243Purpose of Disbursement
April Payroll Non-Contribution Account

Candidate Name

Category/
Type
Office Sought: ☐ House
 ☐ Senate
 ☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C **Transaction ID : SB21B.15117**

Amount of Each Disbursement this Period

 879.24 ☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Michael, D., , ,

Date of Disbursement

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

Mailing Address

City

State

Zip Code

Purpose of Disbursement
April Payroll Non-Contribution Account

Candidate Name

Category/
Type
Office Sought: ☐ House
 ☐ Senate
 ☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C **Transaction ID : SB21B.15117**

Amount of Each Disbursement this Period

 583.00 ☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Mitchell, Ashley, , ,

Date of Disbursement

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

Mailing Address

City

State

Zip Code

Purpose of Disbursement
April Payroll

Candidate Name

Category/
Type
Office Sought: ☐ House
 ☐ Senate
 ☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C **Transaction ID : SB21B.15117**

Amount of Each Disbursement this Period

 382.86 ☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ► 0.00 **TOTAL** This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Mitchell, Maurice, , ,

Date of Disbursement

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

Mailing Address 211 West Market St

City
Long BeachState
NYZip Code
11561Purpose of Disbursement
April Payroll Non-Contribution Account

Candidate Name

Category/
TypeOffice Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State: District:

FEC Identification Number

C**Transaction ID : SB21B.15118**

Amount of Each Disbursement this Period

2242.60

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Monaco, Charles, , ,

Date of Disbursement

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

Mailing Address 100 Ocean Parkway

City
BrooklynState
NYZip Code
11218Purpose of Disbursement
April Payroll Non-Contribution Account

Candidate Name

Category/
TypeOffice Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State: District:

FEC Identification Number

C**Transaction ID : SB21B.15117**

Amount of Each Disbursement this Period

547.97

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Norvig, Isabella, , ,

Date of Disbursement

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

Mailing Address 1499 Union Street Apartment 2

City
BrooklynState
NYZip Code
11213Purpose of Disbursement
April Payroll Non-Contribution Account

Candidate Name

Category/
TypeOffice Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State: District:

FEC Identification Number

C**Transaction ID : SB21B.15117**

Amount of Each Disbursement this Period

840.50

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

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Onishi, Sen, , ,

Date of Disbursement

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

Mailing Address 590 Jefferson Ave

City
BrooklynState
NYZip Code
11213Purpose of Disbursement
Personnel

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C**Transaction ID : SB21B.15133**

Amount of Each Disbursement this Period

1985.98

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Onishi, Sen, , ,

Date of Disbursement

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

Mailing Address 590 Jefferson Ave

City
BrooklynState
NYZip Code
11213Purpose of Disbursement
Personnel from Non-Contribution Account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C**Transaction ID : SB21B.15134**

Amount of Each Disbursement this Period

588.44

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Onishi, Sen, , ,

Date of Disbursement

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

Mailing Address 590 Jefferson Ave

City
BrooklynState
NYZip Code
11213Purpose of Disbursement
Personnel from NYS IE Account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C**Transaction ID : SB21B.15135**

Amount of Each Disbursement this Period

380.03

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

0.00

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)

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

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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Oppenheimer, Jasmin, , ,

Mailing Address 570 44th street

City
Brooklyn

State
NY

Zip Code
11220

Purpose of Disbursement
Personnel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
06 / 02 / 2022

FEC Identification Number

C

Transaction ID : SB21B.15134

Amount of Each Disbursement this Period

6785.46

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Oppenheimer, Jasmin, , ,

Mailing Address 570 44th street

City
Brooklyn

State
NY

Zip Code
11220

Purpose of Disbursement
Personnel from Non-Contribution Account

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
06 / 02 / 2022

FEC Identification Number

C

Transaction ID : SB21B.15134

Amount of Each Disbursement this Period

2010.51

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Oppenheimer, Jasmin, , ,

Mailing Address 570 44th street

City
Brooklyn

State
NY

Zip Code
11220

Purpose of Disbursement
Personnel from NYS IE Account

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
06 / 02 / 2022

FEC Identification Number

C

Transaction ID : SB21B.15134

Amount of Each Disbursement this Period

1298.45

☒ Memo Item

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

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

0.00

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

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

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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Orejuela, Yael, , ,

Mailing Address 373 Ogden Ave

City
Jersey CityState
NJZip Code
07022Purpose of Disbursement
April Payroll

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

State: District:

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : SB21B.15115**

Amount of Each Disbursement this Period

366.42

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Orejuela, Yael, , ,

Mailing Address 373 Ogden Ave

City
Jersey CityState
NJZip Code
07022Purpose of Disbursement
April Payroll Non-Contribution Account

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

State: District:

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : SB21B.15116**

Amount of Each Disbursement this Period

186.04

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Persson, Ericka, , ,

Mailing Address 239 Glenwood Avenue

City
LeoniaState
NJZip Code
07605Purpose of Disbursement
April Payroll Non-Contribution Account

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

State: District:

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : SB21B.15116**

Amount of Each Disbursement this Period

414.96

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

0.00

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)

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

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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Pitt, Elizabeth, , ,

Mailing Address

City

State

Zip Code

Purpose of Disbursement

April Payroll Non-Contribution Account

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 02 / 2022

FEC Identification Number

C

Transaction ID : SB21B.15117

Amount of Each Disbursement this Period

1128.79

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Porritt, Brooke, , ,

Mailing Address

City

State

Zip Code

Purpose of Disbursement

April Payroll

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 02 / 2022

FEC Identification Number

C

Transaction ID : SB21B.15115

Amount of Each Disbursement this Period

231.45

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Salgado, Natalia, , ,

Mailing Address

City

State

Zip Code

Purpose of Disbursement

April Payroll

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 02 / 2022

FEC Identification Number

C

Transaction ID : SB21B.15116

Amount of Each Disbursement this Period

1189.69

☒ Memo Item

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

0.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Springer Jr., Anthony, , ,

Mailing Address

City

State

Zip Code

Purpose of Disbursement

April Payroll Non-Contribution Account

Candidate Name

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	6			0	2			2	0	2	2		

FEC Identification Number

C**Transaction ID : SB21B.15116**

Amount of Each Disbursement this Period

484.59

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Tappen Research

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Research

Candidate Name

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	6			0	8			2	0	2	2		

FEC Identification Number

C**Transaction ID : SB21B.15119**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Tappen Research

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Research

Candidate Name

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	6			0	8			2	0	2	2		

FEC Identification Number

C**Transaction ID : SB21B.15124**

Amount of Each Disbursement this Period

1000.00

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

3500.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Valdez, Joshua, , ,

Mailing Address 1030 Roberta Dr

City
MurphysboroState
ILZip Code
10026Purpose of Disbursement
April Payroll Non-Contribution Account

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		02		2022

FEC Identification Number

C**Transaction ID : SB21B.15117**

Amount of Each Disbursement this Period

512.50

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Valverde, Carlos, , ,

Mailing Address 625 Pennsylvania St

City
DenverState
COZip Code
80203Purpose of Disbursement
April Payroll Non-Contribution Account

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		02		2022

FEC Identification Number

C**Transaction ID : SB21B.15118**

Amount of Each Disbursement this Period

1296.62

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Vapsva, Christine, , ,

Mailing Address 272 W 115th Street

City
New YorkState
NYZip Code
10026Purpose of Disbursement
April Payroll

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		02		2022

FEC Identification Number

C**Transaction ID : SB21B.15111**

Amount of Each Disbursement this Period

274.03

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

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

 Use separate schedule(s)
 for each category of the
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 (check only one)

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

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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Vapsva, Christine, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		02		2022

Mailing Address 272 W 115th Street

 City
 New York

 State
 NY

 Zip Code
 10026

 Purpose of Disbursement
 April Payroll Non-Contribution Account

Candidate Name

 Category/
 Type

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.15116

Amount of Each Disbursement this Period

324.63

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Working Families Organization

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		02		2022

Mailing Address 77 Sands Street

 City
 Brooklyn

 State
 NY

 Zip Code
 11201

 Purpose of Disbursement
 Technology Fee

Candidate Name

 Category/
 Type

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.15120

Amount of Each Disbursement this Period

565.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Working Families Organization

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		02		2022

Mailing Address 77 Sands Street

 City
 Brooklyn

 State
 NY

 Zip Code
 11201

 Purpose of Disbursement
 Technology Fee

Candidate Name

 Category/
 Type

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.15121

Amount of Each Disbursement this Period

190.00

☐ Memo Item

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

755.00

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

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

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

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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Working Families Organization

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		02		2022

Mailing Address 77 Sands Street

City
BrooklynState
NYZip Code
11201Purpose of Disbursement
Technology Fee

Candidate Name

Category/
Type
 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.15124**

Amount of Each Disbursement this Period

1028.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Youngclaus, Jason, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		02		2022

Mailing Address 56 Broadway

City
SomervilleState
MAZip Code
02145Purpose of Disbursement
Personnel

Candidate Name

Category/
Type
 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.15134**

Amount of Each Disbursement this Period

3845.70

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Youngclaus, Jason, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		02		2022

Mailing Address 56 Broadway

City
SomervilleState
MAZip Code
02145Purpose of Disbursement
Personnel from Non-Contribution Account

Candidate Name

Category/
Type
 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.15134**

Amount of Each Disbursement this Period

1139.47

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

1028.00

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

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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Youngclaus, Jason, , ,

Mailing Address 56 Broadway

City
SomervilleState
MAZip Code
02145Purpose of Disbursement
Personnel from NYS IE Account

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : SB21B.15135**

Amount of Each Disbursement this Period

735.91

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Yuen, Vicki, , ,

Mailing Address

City

State

Zip Code

Purpose of Disbursement
Personnel

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : SB21B.15134**

Amount of Each Disbursement this Period

1974.13

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Yuen, Vicki, , ,

Mailing Address

City

State

Zip Code

Purpose of Disbursement
Personnel from Non-Contribution Account

Candidate Name

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

State: District:

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : SB21B.15135**

Amount of Each Disbursement this Period

584.93

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

0.00

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)

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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Yuen, Vicki, , ,

Mailing Address

City

State

Zip Code

Purpose of Disbursement
Personnel from NYS IE Account

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 02 / 2022

FEC Identification Number

C

Transaction ID : SB21B.15135

Amount of Each Disbursement this Period

377.76

☒ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

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

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

0.00

107301.28

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

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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. RASHIDA TLAIB FOR CONGRESS

Mailing Address

City

State

Zip Code

Purpose of Disbursement
Contribution

Candidate Name

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	6			3	0			2	0	2	2		

FEC Identification Number

C**Transaction ID : SB23.151197**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. UNITED WITH DELIA FOR CONGRESS

Mailing Address

City

State

Zip Code

Purpose of Disbursement
Contribution

Candidate Name

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	6			2	8			2	0	2	2		

FEC Identification Number

C**Transaction ID : SB23.151201**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. YUH-LINE NIOU FOR NEW YORK

Mailing Address

City

State

Zip Code

Purpose of Disbursement
Contribution

Candidate Name

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	6			3	0			2	0	2	2		

FEC Identification Number

C**Transaction ID : SB23.151204**

Amount of Each Disbursement this Period

4000.00

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

10000.00

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

10000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

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 (check only one)

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☐ 21b	☐ 22	☐ 23	☐ 26	☐ 27
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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Amplify Action Fund

Mailing Address 234 East Broadway

City
AikenState
SCZip Code
29801
 Purpose of Disbursement
 Phone Calls and in person canvassing for non-federal election

Candidate Name

 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	6			1	0			2	0	2	2		

FEC Identification Number

Transaction ID : SB29.151291

Amount of Each Disbursement this Period

 11216.67

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Angle Mastagni

Mailing Address 507 N Sylvania Ave

City
Fort WorthState
TXZip Code
76111
 Purpose of Disbursement
 Phone Calls for Non-Federal Election

Candidate Name

 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	6			0	9			2	0	2	2		

FEC Identification Number

Transaction ID : SB29.151269

Amount of Each Disbursement this Period

 20553.75

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Dock Productions, 3085 Shady Woods Cir, , ,

Mailing Address

City
LawrenceState
GAZip Code
30044
 Purpose of Disbursement
 Literature for Non-Federal Election

Candidate Name

 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	6			2	9			2	0	2	2		

FEC Identification Number

Transaction ID : SB29.151262

Amount of Each Disbursement this Period

 1100.00

☐ Memo Item

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

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

 32870.42

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

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

FOR LINE NUMBER:
(check only one)

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☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Go Union Printing

Mailing Address 2600 9th St North
Suite 302

City
St Petersburg

State
FL

Zip Code
33704

Purpose of Disbursement
Printing for Non-Federal Campaign

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
06 / 26 / 2022

FEC Identification Number

C [REDACTED]

Transaction ID : SB29.151277

Amount of Each Disbursement this Period

[REDACTED] 2084.70

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. INDIVISIBLE ACTION

Mailing Address PO BOX 43135

City
WASHINGTON

State
DC

Zip Code
20010

Purpose of Disbursement
Contribution

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

011
Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
06 / 15 / 2022

FEC Identification Number

C C00678839

Transaction ID : SB29.151273

Amount of Each Disbursement this Period

[REDACTED] 100000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Middle Seat

Mailing Address 1734 Connecticut Ave NW

City
Washington

State
DC

Zip Code
20009

Purpose of Disbursement
Digital Ads for Non-Federal Election

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
06 / 14 / 2022

FEC Identification Number

C [REDACTED]

Transaction ID : SB29.151261

Amount of Each Disbursement this Period

[REDACTED] 1000.00

☐ Memo Item

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

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

[REDACTED] 103084.70

[REDACTED]

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

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Moxie Media

Mailing Address

City

State

Zip Code

Purpose of Disbursement
Printing for Non-Federal Election

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 07 / 2022

FEC Identification Number

C

Transaction ID : SB29.151219

Amount of Each Disbursement this Period

66171.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Moxie Media

Mailing Address

City

State

Zip Code

Purpose of Disbursement
Printing for Non-Federal Election

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 09 / 2022

FEC Identification Number

C

Transaction ID : SB29.151218

Amount of Each Disbursement this Period

49090.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Moxie Media

Mailing Address

City

State

Zip Code

Purpose of Disbursement
Printing for Non-Federal Election

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 14 / 2022

FEC Identification Number

C

Transaction ID : SB29.151217

Amount of Each Disbursement this Period

46712.00

☐ Memo Item

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

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

161973.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Moxie Media

Mailing Address

City

State

Zip Code

Purpose of Disbursement
Printing for Non-Federal Election

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 16 / 2022

FEC Identification Number

C

Transaction ID : SB29.151216

Amount of Each Disbursement this Period

46362.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Moxie Media

Mailing Address

City

State

Zip Code

Purpose of Disbursement
Printing for Non-Federal Election

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 22 / 2022

FEC Identification Number

C

Transaction ID : SB29.151213

Amount of Each Disbursement this Period

21739.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Peerless LLC

Mailing Address 3711 Parry Ave

City
Dallas

State
TX

Zip Code
75233

Purpose of Disbursement
Canvassing for Non-Federal Election

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 13 / 2022

FEC Identification Number

C

Transaction ID : SB29.151312

Amount of Each Disbursement this Period

6756.00

☐ Memo Item

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

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

74857.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Pelican Print

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		16		2022

Mailing Address 3930 Flagstone Ct

City
FlorissantState
MOZip Code
63033Purpose of Disbursement
Printing for Non-Federal Election

Candidate Name

Category/
TypeOffice Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State: District:

FEC Identification Number

C

Transaction ID : SB29.151266

Amount of Each Disbursement this Period

10893.37

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Pelican Print

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		24		2022

Mailing Address 3930 Flagstone Ct

City
FlorissantState
MOZip Code
63033Purpose of Disbursement
Printing for Non-Federal Election

Candidate Name

Category/
TypeOffice Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State: District:

FEC Identification Number

C

Transaction ID : SB29.151265

Amount of Each Disbursement this Period

10893.37

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Quality Corporate Management and Administration

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		08		2022

Mailing Address 507-B E Smith Street

City
TimmonsvilleState
SCZip Code
29161Purpose of Disbursement
Radio Ads for Non-Federal Elections

Candidate Name

Category/
TypeOffice Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State: District:

FEC Identification Number

C

Transaction ID : SB29.151287

Amount of Each Disbursement this Period

3778.44

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

25565.18

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Scale to Win

Mailing Address 13742 Harper Street

City
Santa AnaState
CAZip Code
92703Purpose of Disbursement
Texting for non-Federal Election

Candidate Name

Category/
TypeOffice 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	6			0	3			2	0	2	2	

FEC Identification Number

C **Transaction ID : SB29.151264**

Amount of Each Disbursement this Period

4046.56

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Strategic Media

Mailing Address 1209 Orange Street

City
WilmingtonState
DEZip Code
19801Purpose of Disbursement
Digital for non-federal Election

Candidate Name

Category/
TypeOffice 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	6			1	6			2	0	2	2	

FEC Identification Number

C **Transaction ID : SB29.151220**

Amount of Each Disbursement this Period

128486.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. TCC Consulting

Mailing Address 1325 St Andrews

City
ColumbiaState
SCZip Code
29210Purpose of Disbursement
Canvassing for Non-Federal Election

Candidate Name

Category/
TypeOffice 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	6			1	0			2	0	2	2	

FEC Identification Number

C **Transaction ID : SB29.151281**

Amount of Each Disbursement this Period

3520.00

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

136052.56

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)

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

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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. TIRRC VOTES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		30		2022

Mailing Address 3310 EZELL ROAD

City
NASHVILLEState
TNZip Code
37211Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

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

State: District:

FEC Identification Number

C C90018318

Transaction ID : SB29.151267

Amount of Each Disbursement this Period

15000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Westerleigh Press

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		03		2022

Mailing Address

City

State

Zip Code

Purpose of Disbursement
Printing for Non-Federal ElectionCategory/
Type

Candidate Name

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

State: District:

FEC Identification Number

C

Transaction ID : SB29.151215

Amount of Each Disbursement this Period

33086.38

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Westerleigh Press

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		09		2022

Mailing Address

City

State

Zip Code

Purpose of Disbursement
Printing for Non-Federal ElectionCategory/
Type

Candidate Name

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

State: District:

FEC Identification Number

C

Transaction ID : SB29.151214

Amount of Each Disbursement this Period

24412.47

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

72498.85

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)

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

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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Westerleigh Press

Mailing Address

City

State

Zip Code

Purpose of Disbursement
Printing for Non-Federal Election

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

State: District:

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Category/
Type

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : SB29.151210**

Amount of Each Disbursement this Period

21639.71

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Westerleigh Press

Mailing Address

City

State

Zip Code

Purpose of Disbursement
Printing for Non-Federal Election

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

State: District:

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	5			2	0	2	2	

FEC Identification Number

C**Transaction ID : SB29.151211**

Amount of Each Disbursement this Period

21639.71

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Westerleigh Press

Mailing Address

City

State

Zip Code

Purpose of Disbursement
Printing for Non-Federal Election

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

State: District:

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Category/
Type

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : SB29.151209**

Amount of Each Disbursement this Period

10435.00

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

53714.42

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)

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

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NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. WFP IE COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		02		2022

Mailing Address 77 SANDS STREET
6TH FLOORCity
BROOKLYNState
NYZip Code
11201Purpose of Disbursement
Transfer

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C C00626861**Transaction ID : SB29.151270**

Amount of Each Disbursement this Period

75000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Working Families Organization

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2022

Mailing Address 77 Sands Street

City
BrooklynState
NYZip Code
11201Purpose of Disbursement
Contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB29.151272**

Amount of Each Disbursement this Period

40000.00

☐ Memo Item

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

Purpose of Disbursement

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Amount of Each Disbursement this Period

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

115000.00

775616.13

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

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

NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

Bryce for CongressNature of Debt (Purpose):
Texting services

Mailing Address PO BOX 44404

City
RACINEState
WIZip Code
53404

Outstanding Balance Beginning This Period

381.15

Transaction ID : SD9.57050

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

381.15

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

People for Joann Bryn SmithNature of Debt (Purpose):
Refund of Contribution

Mailing Address PO Box 4156

City
WyomingState
PAZip Code
18644

Outstanding Balance Beginning This Period

1500.00

Transaction ID : SD9.101782

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1500.00

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)..... ►

1881.15

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

1881.15

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) ►

1881.15

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

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

NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

Angle Mastagni

Nature of Debt (Purpose):

Phone Calls - reduced from estimate of \$10k

Mailing Address 507 N Sylvania Ave

City

Fort Worth

State

TX

Zip Code

76111

Outstanding Balance Beginning This Period

8422.80

Transaction ID : SD10.141268

Amount Incurred This Period

0.00

Payment This Period

8422.80

Outstanding Balance at Close of This Period

0.00

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

Base Builder

Nature of Debt (Purpose):

Phone Bank

Mailing Address 77 Sands Street

6th Floor

City

Brooklyn

State

NY

Zip Code

11201

Outstanding Balance Beginning This Period

11000.00

Transaction ID : SD10.130907

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

11000.00

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

Base Builder

Nature of Debt (Purpose):

Canvassing

Mailing Address 77 Sands Street

6th Floor

City

Brooklyn

State

NY

Zip Code

11201

Outstanding Balance Beginning This Period

46936.59

Transaction ID : SD10.131645

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

46936.59

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

57936.59

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)

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

NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

Base BuilderNature of Debt (Purpose):
In Person CanvassingMailing Address 77 Sands Street
6th FloorCity
BrooklynState
NYZip Code
11201

Outstanding Balance Beginning This Period

26000.00

Transaction ID : SD10.134324

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

26000.00

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

Base BuilderNature of Debt (Purpose):
In person CanvassingMailing Address 77 Sands Street
6th FloorCity
BrooklynState
NYZip Code
11201

Outstanding Balance Beginning This Period

21000.00

Transaction ID : SD10.140951

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

21000.00

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

Base BuilderNature of Debt (Purpose):
In Person CanvassingMailing Address 77 Sands Street
6th FloorCity
BrooklynState
NYZip Code
11201

Outstanding Balance Beginning This Period

90000.00

Transaction ID : SD10.140787

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

90000.00

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

137000.00

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)

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

NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

Base BuilderNature of Debt (Purpose):
In Person CanvassingMailing Address 77 Sands Street
6th FloorCity
BrooklynState
NYZip Code
11201

Outstanding Balance Beginning This Period

50000.00

Transaction ID : SD10.140788

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

50000.00

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

Base BuilderNature of Debt (Purpose):
In Person CanvassingMailing Address 77 Sands Street
6th FloorCity
BrooklynState
NYZip Code
11201

Outstanding Balance Beginning This Period

200000.00

Transaction ID : SD10.140893

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

200000.00

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

Base BuilderNature of Debt (Purpose):
Phone BankMailing Address 77 Sands Street
6th FloorCity
BrooklynState
NYZip Code
11201

Outstanding Balance Beginning This Period

11000.00

Transaction ID : SD10.141344

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

11000.00

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

261000.00

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)

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

NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

Base BuilderNature of Debt (Purpose):
In Person CanvassingMailing Address 77 Sands Street
6th FloorCity
BrooklynState
NYZip Code
11201

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.151257

Amount Incurred This Period

100000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

100000.00

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

Berlin Rosen

Nature of Debt (Purpose):

Digital Ads increased from estimate of \$3000

Mailing Address 15 Maiden Lane
Suite 1600City
New YorkState
NYZip Code
10038

Outstanding Balance Beginning This Period

4929.00

Transaction ID : SD10.140419

Amount Incurred This Period

0.00

Payment This Period

4929.00

Outstanding Balance at Close of This Period

0.00

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

Berlin Rosen

Nature of Debt (Purpose):

Door Hangers

Mailing Address 15 Maiden Lane
Suite 1600City
New YorkState
NYZip Code
10038

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.151260

Amount Incurred This Period

7500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7500.00

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

107500.00

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)

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

NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

CCM&Co

Nature of Debt (Purpose):

Printed Literature up from estimated \$3k

Mailing Address 1022 Boulevard 329

City

West Hartford

State

CT

Zip Code

06119

Outstanding Balance Beginning This Period

3625.00

Transaction ID : SD10.141275

Amount Incurred This Period

0.00

Payment This Period

3625.00

Outstanding Balance at Close of This Period

0.00

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

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting

Mailing Address 77 Sands Street

6th Floor

City

Brooklyn

State

NY

Zip Code

11201

Outstanding Balance Beginning This Period

50183.72

Transaction ID : SD10.134326

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

50183.72

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

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting

Mailing Address 77 Sands Street

6th Floor

City

Brooklyn

State

NY

Zip Code

11201

Outstanding Balance Beginning This Period

2500.00

Transaction ID : SD10.151323

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

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

52683.72

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)

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

NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

Community Labor Administrative ServicesNature of Debt (Purpose):
TextingMailing Address 77 Sands Street
6th FloorCity
BrooklynState
NYZip Code
11201

Outstanding Balance Beginning This Period

103.20

Transaction ID : SD10.140968

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

103.20

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

Community Labor Administrative ServicesNature of Debt (Purpose):
Texting and phone callsMailing Address 77 Sands Street
6th FloorCity
BrooklynState
NYZip Code
11201

Outstanding Balance Beginning This Period

5475.12

Transaction ID : SD10.141307

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5475.12

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

Community Labor Administrative ServicesNature of Debt (Purpose):
TextingMailing Address 77 Sands Street
6th FloorCity
BrooklynState
NYZip Code
11201

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.151303

Amount Incurred This Period

7900.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7900.00

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

13478.32

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)

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

NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

Community Labor Administrative ServicesNature of Debt (Purpose):
TextingMailing Address 77 Sands Street
6th FloorCity
BrooklynState
NYZip Code
11201

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.151300

Amount Incurred This Period

1664.20

Payment This Period

0.00

Outstanding Balance at Close of This Period

1664.20

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

Community Labor Administrative Services, Inc.Nature of Debt (Purpose):
TextingMailing Address 77 Sands Street
6th FloorCity
BrooklynState
NYZip Code
11201

Outstanding Balance Beginning This Period

410.12

Transaction ID : SD10.95841

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

410.12

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

FacebookNature of Debt (Purpose):
Digital Ads

Mailing Address 1 Hacker Way

City
Menlo ParkState
CAZip Code
94025

Outstanding Balance Beginning This Period

10000.00

Transaction ID : SD10.141270

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10000.00

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

12074.32

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)

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

NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

Other 98% ActionNature of Debt (Purpose):
Digital Ads

Mailing Address 3519 NE 15th Ave

City
PortlandState
ORZip Code
97212

Outstanding Balance Beginning This Period

500.00

Transaction ID : SD10.141266

Amount Incurred This Period

0.00

Payment This Period

500.00

Outstanding Balance at Close of This Period

0.00

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

Pelican PrintNature of Debt (Purpose):
Printed Literature

Mailing Address 3930 Flagstone Ct

City
FlorissantState
MOZip Code
63033

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.151296

Amount Incurred This Period

584.43

Payment This Period

0.00

Outstanding Balance at Close of This Period

584.43

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

Pelican PrintNature of Debt (Purpose):
Printed Literature

Mailing Address 3930 Flagstone Ct

City
FlorissantState
MOZip Code
63033

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.151297

Amount Incurred This Period

584.43

Payment This Period

0.00

Outstanding Balance at Close of This Period

584.43

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

1168.86

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 93 OF 113

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

NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

Robocall.org

Nature of Debt (Purpose):

Robocall

Mailing Address 4601 North Fairfax Drive

City
ArlingtonState
VAZip Code
22203

Outstanding Balance Beginning This Period

41.27

Transaction ID : SD10.141272

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

41.27

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

Strategic Media

Nature of Debt (Purpose):

Mail

Mailing Address 1209 Orange Street

City
WilmingtonState
DEZip Code
19801

Outstanding Balance Beginning This Period

38451.21

Transaction ID : SD10.140793

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

38451.21

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

Texas Toolbelt

Nature of Debt (Purpose):

In Person Canvassing increased from \$99,662

Mailing Address 6717 Mount Carmel Street

City
HoustonState
TXZip Code
77087

Outstanding Balance Beginning This Period

116740.33

Transaction ID : SD10.140791

Amount Incurred This Period

0.00

Payment This Period

116740.33

Outstanding Balance at Close of This Period

0.00

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

38492.48

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 94 OF 113

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

NAME OF COMMITTEE (In Full)

WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE

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

The Baseline Agency

Nature of Debt (Purpose):

Mail

Mailing Address 1835 7th street nw #203

City

Washington

State

DC

Zip Code

20001

Outstanding Balance Beginning This Period

39963.76

Transaction ID : SD10.140798

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

39963.76

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

Turn it Blue

Nature of Debt (Purpose):

Digital Ads

Mailing Address 780 Utica Ave

City

Coulder

State

CO

Zip Code

80304

Outstanding Balance Beginning This Period

10000.00

Transaction ID : SD10.134328

Amount Incurred This Period

0.00

Payment This Period

10000.00

Outstanding Balance at Close of This Period

0.00

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)..... ►

39963.76

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

721298.05

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) ►

721298.05

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 95 OF 113
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE				FEC IDENTIFICATION NUMBER ▼ C C00606962	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on				M M / D D / Y Y Y Y Y Y	
Full Name of Payee Amplify Action Fund			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y		
Mailing Address 234 East Broadway			Amount 250.00		
City Aiken	State SC	Zip Code 29801	Transaction ID : SE.140621 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y		
Purpose of Expenditure Phone Calls		Category/ Type 007			
Name of Federal Candidate: Matthews, Krystle, , ,			☒ Support ☐ Oppose Office Sought: ☐ House ☒ Senate ☐ President ☐ General District: _____ State: SC		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶ _____		
250.00					
Full Name of Payee Amplify Action Fund			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y		
Mailing Address 234 East Broadway			Amount 250.00		
City Aiken	State SC	Zip Code 29801	Transaction ID : SE.140655 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y		
Purpose of Expenditure Phone Calls		Category/ Type 011			
Name of Federal Candidate: Matthews, Krystle, , ,			☒ Support ☐ Oppose Office Sought: ☐ House ☒ Senate ☐ President ☐ General District: _____ State: SC		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶ _____		
500.00					
(a) SUBTOTAL of Itemized Independent Expenditures			500.00		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Boland, Michael, , ,</u>			Date M M / D D / Y Y Y Y Y Y		
			07 20 2022		

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE				FEC IDENTIFICATION NUMBER ▼ C C00606962	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on				M M / D D / Y Y Y Y Y Y	
Full Name of Payee Amplify Action Fund			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y		
Mailing Address 234 East Broadway			Amount 300.00		
City Aiken	State SC	Zip Code 29801	Transaction ID : SE.140916 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y		
Purpose of Expenditure In person canvassing		Category/ Type 001	M M / D D / Y Y Y Y Y Y		
Name of Federal Candidate: Matthews, Krystle, , ,			Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: SC		
Calendar Year-To-Date Per Election for Office Sought 800.00			Disbursement For: ☒ Primary ☐ General 2022 ☐ Other (specify) ▶ _____		
Full Name of Payee Amplify Action Fund			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y		
Mailing Address 234 East Broadway			Amount 250.00		
City Aiken	State SC	Zip Code 29801	Transaction ID : SE.131581 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y		
Purpose of Expenditure Phone Calls		Category/ Type 001	M M / D D / Y Y Y Y Y Y		
Name of Federal Candidate: HUNDLEY, EVANGELINE, , ,			Office Sought: ☒ House District: 05 ☐ President ☐ Senate State: SC		
Calendar Year-To-Date Per Election for Office Sought 250.00			Disbursement For: ☒ Primary ☐ General 2022 ☐ Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures			550.00		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Boland, Michael, , ,</u>			Date M M / D D / Y Y Y Y Y Y		

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE				FEC IDENTIFICATION NUMBER ▼ C C00606962	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on				M M / D D / Y Y Y Y Y Y	
Full Name of Payee Amplify Action Fund			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y		
Mailing Address 234 East Broadway			Amount 300.00		
City Aiken	State SC	Zip Code 29801	Transaction ID : SE.140939 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y		
Purpose of Expenditure In Person Canvassing		Category/ Type 001	M M / D D / Y Y Y Y Y Y		
Name of Federal Candidate: HUNDLEY, EVANGELINE, , ,			☒ Support ☐ Oppose Office Sought: ☒ House ☐ President ☐ Senate District: <u>05</u> State: <u>SC</u>		
Calendar Year-To-Date Per Election for Office Sought			550.00 Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶		
Full Name of Payee Amplify Action Fund			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y		
Mailing Address 234 East Broadway			Amount 300.00		
City Aiken	State SC	Zip Code 29801	Transaction ID : SE.141152 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y		
Purpose of Expenditure In Person Canvassing		Category/ Type 001	M M / D D / Y Y Y Y Y Y		
Name of Federal Candidate: Matthews, Krystle, , ,			☒ Support ☐ Oppose Office Sought: ☐ House ☒ Senate ☐ President ☐ Senate District: _____ State: <u>SC</u>		
Calendar Year-To-Date Per Election for Office Sought			2272.50 Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			600.00		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Boland, Michael, , ,</u> [Electronically Filed]			Date M M / D D / Y Y Y Y Y Y		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE			FEC IDENTIFICATION NUMBER ▼ C C00606962	
Check if ☐ 24-hour report ☐ 48-hour report ▶ New report Amends report filed on			M M / D D / Y Y Y Y Y	
Full Name of Payee ☐ Memo Item Amplify Action Fund		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y		
Mailing Address 234 East Broadway		Amount 833.33		
City Aiken	State SC	Zip Code 29801	Transaction ID : SE.140670 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y	
Purpose of Expenditure Phone Calls		Category/Type 001	M M / D D / Y Y Y Y Y	
Name of Federal Candidate: Matthews, Krystle, , ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: SC	
Calendar Year-To-Date Per Election for Office Sought		4755.05		
Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶		Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶		
Full Name of Payee ☐ Memo Item Amplify Action Fund		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y		
Mailing Address 234 East Broadway		Amount 1000.00		
City Aiken	State SC	Zip Code 29801	Transaction ID : SE.141162 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y	
Purpose of Expenditure In Person Canvassing		Category/Type 006	M M / D D / Y Y Y Y Y	
Name of Federal Candidate: Matthews, Krystle, , ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: SC	
Calendar Year-To-Date Per Election for Office Sought		5755.05		
Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶		Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures		1833.33		
(b) SUBTOTAL of Unitemized Independent Expenditures.....				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Boland, Michael, , ,</u>		Date M M / D D / Y Y Y Y Y		[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE				FEC IDENTIFICATION NUMBER ▼ C C00606962	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on				M M M / D D D / Y Y Y Y Y Y M M M / D D D / Y Y Y Y Y Y M M M / D D D / Y Y Y Y Y Y	
Full Name of Payee Angle Mastagni			☐ Memo Item Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y M M M / D D D / Y Y Y Y Y Y M M M / D D D / Y Y Y Y Y Y		
Mailing Address 507 N Sylvania Ave			Amount 8422.80 Transaction ID : SE.151223 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y M M M / D D D / Y Y Y Y Y Y M M M / D D D / Y Y Y Y Y Y		
City State Zip Code Fort Worth TX 76111					
Purpose of Expenditure Phone Calls Category/Type 001					
Name of Federal Candidate: VALLEJO, MICHELLE, , ,			☒ Support Office Sought: ☒ House District: 15 ☐ Oppose ☐ President ☐ Senate State: TX		
Calendar Year-To-Date Per Election for Office Sought 8422.80			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶		
Full Name of Payee Base Builder			☒ Memo Item Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y M M M / D D D / Y Y Y Y Y Y M M M / D D D / Y Y Y Y Y Y		
Mailing Address 77 Sands Street 6th Floor			Amount 100000.00 Transaction ID : SE.151255 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y M M M / D D D / Y Y Y Y Y Y M M M / D D D / Y Y Y Y Y Y		
City State Zip Code Brooklyn NY 11201					
Purpose of Expenditure Phone Calls Category/Type 006					
Name of Federal Candidate: BARNES, MANDELA, , ,			☒ Support Office Sought: ☐ House District: _____ ☐ Oppose ☐ President ☒ Senate State: WI		
Calendar Year-To-Date Per Election for Office Sought 99916.65			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures				 8422.80	
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Boland, Michael, , , Signature			[Electronically Filed]		Date M M M / D D D / Y Y Y Y Y Y M M M / D D D / Y Y Y Y Y Y M M M / D D D / Y Y Y Y Y Y

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00606962
--	--

 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on MM / DD / YYYY

Full Name of Payee ☐ Memo Item Berlin Rosen			Date of Public Distribution/Dissemination MM / DD / YYYY 03 / 08 / 2022	
Mailing Address 15 Maiden Lane Suite 1600			Amount 4929.00	
City New York	State NY	Zip Code 10038		
Purpose of Expenditure Digital Ads		Category/Type 001	Transaction ID : SE.151234 Date of Disbursement or Obligation MM / DD / YYYY 06 / 20 / 2022	
Name of Federal Candidate: BARNES, MANDELA, , ,			Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: <u>WI</u>	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☒ Primary ☐ General 2022 ☐ Other (specify) ▶ _____	
99863.41				

Full Name of Payee ☒ Memo Item Berlin Rosen			Date of Public Distribution/Dissemination MM / DD / YYYY 03 / 08 / 2022	
Mailing Address 15 Maiden Lane Suite 1600			Amount 4929.00	
City New York	State NY	Zip Code 10038		
Purpose of Expenditure Digital Ads		Category/Type 001	Transaction ID : SE.151235 Date of Disbursement or Obligation MM / DD / YYYY 06 / 20 / 2022	
Name of Federal Candidate: BARNES, MANDELA, , ,			Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: <u>WI</u>	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☒ Primary ☐ General 2022 ☐ Other (specify) ▶ _____	
99863.41				

(a) SUBTOTAL of Itemized Independent Expenditures	▶	4929.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Boland, Michael, , ,

[Electronically Filed]

Date

MM / DD / YYYY

07 / 20 / 2022

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 101 OF 113
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE				FEC IDENTIFICATION NUMBER ▼ C C00606962		
Check if ☐ 24-hour report ☐ 48-hour report ☒ New report Amends report filed on				M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y		
Full Name of Payee Berlin Rosen			☒ Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y	
Mailing Address 15 Maiden Lane Suite 1600			Amount 7500.00		Transaction ID : SE.151259 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y	
City New York		State NY		Zip Code 10038		
Purpose of Expenditure Doorhangers			Category/Type 006		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y	
Name of Federal Candidate: BARNES, MANDELA, , ,				☒ Support ☐ Oppose		
Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: <u>WI</u>				Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶ _____		
Calendar Year-To-Date Per Election for Office Sought				 99916.65		
Full Name of Payee CCM&Co			☐ Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y	
Mailing Address 1022 Boulevard 329			Amount 3625.00		Transaction ID : SE.151238 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y	
City West Hartford		State CT		Zip Code 06119		
Purpose of Expenditure Printed Literature			Category/Type 001		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y	
Name of Federal Candidate: KENYATTA, MALCOLM, , ,				☒ Support ☐ Oppose		
Office Sought: ☒ House District: _____ ☐ President ☐ Senate State: <u>PA</u>				Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶ _____		
Calendar Year-To-Date Per Election for Office Sought				 3625.00		
(a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures 3625.00 						
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.						
Signature Boland, Michael, , ,				Date M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y		

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE				FEC IDENTIFICATION NUMBER ▼ C C00606962	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on				M M / D D / Y Y Y Y Y Y Y Y	
Full Name of Payee CCM&Co			☒ Memo Item		Date of Public Distribution/Dissemination
Mailing Address 1022 Boulevard 329			M M / D D / Y Y Y Y Y Y Y Y		Amount
City West Hartford		State CT	Zip Code 06119	3625.00	
Purpose of Expenditure Printed Literature			Category/ Type 001		Transaction ID : SE.151239 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y Y Y
Name of Federal Candidate: KENYATTA, MALCOLM, , ,			☒ Support ☐ Oppose		Office Sought: ☒ House District: _____ ☐ President ☐ Senate State: PA
Calendar Year-To-Date Per Election for Office Sought			3625.00		Disbursement For: ☒ Primary ☐ General 2022 ☐ Other (specify) ▶
Full Name of Payee Community Labor Administrative Services			☒ Memo Item		Date of Public Distribution/Dissemination
Mailing Address 77 Sands Street 6th Floor			M M / D D / Y Y Y Y Y Y Y Y		Amount
City Brooklyn		State NY	Zip Code 11201	7900.00	
Purpose of Expenditure Texting			Category/ Type 001		Transaction ID : SE.151306 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y Y Y
Name of Federal Candidate: RAMIREZ, DELIA, , ,			☒ Support ☐ Oppose		Office Sought: ☒ House District: 03 ☐ President ☐ Senate State: IL
Calendar Year-To-Date Per Election for Office Sought			200000.00		Disbursement For: ☒ Primary ☐ General 2022 ☐ Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Boland, Michael, , , Signature			[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y Y Y

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 103 OF 113
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE				FEC IDENTIFICATION NUMBER ▼ C C00606962	
Check if ☐ 24-hour report ☐ 48-hour report ☒ New report Amends report filed on				M M / D D / Y Y Y Y Y Y	
Full Name of Payee ☒ Memo Item Community Labor Administrative Services			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y		
Mailing Address 77 Sands Street 6th Floor			Amount 1664.20		
City Brooklyn	State NY	Zip Code 11201	Transaction ID : SE.151301 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y		
Purpose of Expenditure Texting		Category/ Type	06		
Name of Federal Candidate: Matthews, Krystle, , ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: SC		
Calendar Year-To-Date Per Election for Office Sought		5755.05	Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶		
Full Name of Payee ☐ Memo Item Community Labor Administrative Services			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y		
Mailing Address 77 Sands Street 6th Floor			Amount 53.24		
City Brooklyn	State NY	Zip Code 11201	Transaction ID : SE.140987 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y		
Purpose of Expenditure Phone Calls		Category/ Type	006		
Name of Federal Candidate: BARNES, MANDELA, , ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: WI		
Calendar Year-To-Date Per Election for Office Sought		99916.65	Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			53.24		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Boland, Michael, , ,</u>		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE				FEC IDENTIFICATION NUMBER ▼ C C00606962	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on				M M M D D D Y Y Y Y Y	
Full Name of Payee ☒ Memo Item Community Labor Administrative Services			Date of Public Distribution/Dissemination M M M D D D Y Y Y Y Y		
Mailing Address 77 Sands Street 6th Floor			Amount 53.24		
City Brooklyn	State NY	Zip Code 11201	Transaction ID : SE.151258 Date of Disbursement or Obligation M M M D D D Y Y Y Y Y		
Purpose of Expenditure Phone Calls		Category/ Type 006	M M M D D D Y Y Y Y Y		
Name of Federal Candidate: BARNES, MANDELA, , ,			☒ Support ☐ Oppose Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: WI		
Calendar Year-To-Date Per Election for Office Sought			99916.65		
Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶			2022		
Full Name of Payee ☐ Memo Item Delloro, Alyssa, , ,			Date of Public Distribution/Dissemination M M M D D D Y Y Y Y Y		
Mailing Address 637 Meadow Ln, Unit 208			Amount 251.73		
City Burlington	State WI	Zip Code 53105	Transaction ID : SE.131471 Date of Disbursement or Obligation M M M D D D Y Y Y Y Y		
Purpose of Expenditure Travel Reimbursement		Category/ Type 001	M M M D D D Y Y Y Y Y		
Name of Federal Candidate: Cisneros, Jessica, , ,			☒ Support ☐ Oppose Office Sought: ☒ House District: 28 ☐ President ☐ Senate State: TX		
Calendar Year-To-Date Per Election for Office Sought			557473.20		
Disbursement For: ☐ Primary ☐ General ☒ Other (specify) ▶			2022 Runoff		
(a) SUBTOTAL of Itemized Independent Expenditures			251.73		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Boland, Michael, , ,</u>			Date [Electronically Filed]		
Signature			M M M D D D Y Y Y Y Y		
Signature			07 20 2022		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE				FEC IDENTIFICATION NUMBER ▼ C C00606962	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on				M M / D D / Y Y Y Y Y Y	
Full Name of Payee ELPI Synergy Enterprises			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y		
Mailing Address PO Box 1280			Amount 292.50		
City Marion	State CA	Zip Code 29571	Transaction ID : SE.136827		
Purpose of Expenditure Door Hangers		Category/Type 006	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y		
Name of Federal Candidate: Matthews, Krystle, , ,			Office Sought: ☐ House ☒ Senate ☐ President ☐ District: _____ State: SC		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶ _____		
1972.50			2022		
Full Name of Payee Middle Seat			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y		
Mailing Address 1734 Connecticut Ave NW			Amount 30000.00		
City Washington	State DC	Zip Code 20009	Transaction ID : SE.140917		
Purpose of Expenditure Digital Ads		Category/Type 006	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y		
Name of Federal Candidate: RAMIREZ, DELIA, , ,			Office Sought: ☐ House ☒ Senate ☐ President ☐ District: 03 State: IL		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶ _____		
30000.00			2022		
(a) SUBTOTAL of Itemized Independent Expenditures			30292.50		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Boland, Michael, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y	
07		20		2022	

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE				FEC IDENTIFICATION NUMBER ▼ C C00606962	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee Other 98% Action ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 06 / 2022		
Mailing Address 3519 NE 15th Ave			Amount 500.00		
City Portland	State OR	Zip Code 97212	Transaction ID : SE.151221 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 06 / 01 / 2022		
Purpose of Expenditure Digital Ads		Category/ Type 004			
Name of Federal Candidate: SCHRADER, KURT, , , ☐ Support ☒ Oppose			Office Sought: ☒ House District: 05 ☐ President ☐ Senate State: OR		
Calendar Year-To-Date Per Election for Office Sought 294550.26			Disbursement For: ☒ Primary ☐ General 2022 ☐ Other (specify) ▶		
Full Name of Payee Other 98% Action ☒ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 06 / 2022		
Mailing Address 3519 NE 15th Ave			Amount 500.00		
City Portland	State OR	Zip Code 97212	Transaction ID : SE.151230 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 06 / 01 / 2022		
Purpose of Expenditure Digital Ads		Category/ Type 001			
Name of Federal Candidate: SCHRADER, KURT, , , ☐ Support ☒ Oppose			Office Sought: ☒ House District: 05 ☐ President ☐ Senate State: OR		
Calendar Year-To-Date Per Election for Office Sought 294550.26			Disbursement For: ☒ Primary ☐ General 2022 ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			500.00		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Boland, Michael, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 07 / 20 / 2022	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE				FEC IDENTIFICATION NUMBER ▼ C C00606962		
Check if ☐ 24-hour report ☐ 48-hour report ☒ New report Amends report filed on				M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y		
Full Name of Payee Pelican Print			☒ Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y	
Mailing Address 3930 Flagstone Ct			Amount 584.43		Transaction ID : SE.151298 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y	
City Florissant	State MO	Zip Code 63033	Category/Type 001			
Purpose of Expenditure Printed Literature			Name of Federal Candidate:		Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: <u>SC</u>	
Matthews, Krystle, , ,			☒ Support ☐ Oppose		Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶ _____	
Calendar Year-To-Date Per Election for Office Sought			5755.05			
Full Name of Payee Pelican Print			☒ Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y	
Mailing Address 3930 Flagstone Ct			Amount 584.43		Transaction ID : SE.151299 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y	
City Florissant	State MO	Zip Code 63033	Category/Type 001			
Purpose of Expenditure Printed Literature			Name of Federal Candidate:		Office Sought: ☒ House District: <u>05</u> ☐ President ☐ Senate State: <u>SC</u>	
HUNDLEY, EVANGELINE, , ,			☒ Support ☐ Oppose		Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶ _____	
Calendar Year-To-Date Per Election for Office Sought			1040.00			
(a) SUBTOTAL of Itemized Independent Expenditures 0.00						
(b) SUBTOTAL of Unitemized Independent Expenditures.....						
(c) TOTAL Independent Expenditures						
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.						
Boland, Michael, , , Signature			[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y	

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ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE				FEC IDENTIFICATION NUMBER ▼ C C00606962	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee Quality Corporate Management and Administration ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 06 / 10 / 2022		
Mailing Address 507-B E Smith Street			Amount 1649.22		
City Timmonssville	State SC	Zip Code 29161	Transaction ID : SE.151283		
Purpose of Expenditure Radio Ads		Category/Type 001	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 06 / 10 / 2022		
Name of Federal Candidate: Matthews, Krystle, , ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☐ President ☒ Senate State: SC		
Calendar Year-To-Date Per Election for Office Sought		3921.72	Disbursement For: ☒ Primary ☐ General 2022 ☐ Other (specify) ▶ _____		
Full Name of Payee Quality Corporate Management and Administration ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 06 / 10 / 2022		
Mailing Address 507-B E Smith Street			Amount 490.00		
City Timmonssville	State SC	Zip Code 29161	Transaction ID : SE.151285		
Purpose of Expenditure Radio Ads		Category/Type 001	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 06 / 10 / 2022		
Name of Federal Candidate: HUNDLEY, EVANGELINE, , ,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 05 ☐ President ☐ Senate State: SC		
Calendar Year-To-Date Per Election for Office Sought		1040.00	Disbursement For: ☒ Primary ☐ General 2022 ☐ Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures			2139.22		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Boland, Michael, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 07 / 20 / 2022	

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NAME OF COMMITTEE (In Full) WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00606962
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 Check if ☐ 24-hour report ☐ 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee ☐ Memo Item TCC Consulting			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 06 07 2022	
Mailing Address 1325 St Andrews				
City Columbia	State SC	Zip Code 29210	Amount 440.00	
Purpose of Expenditure Phone Calls			Category/Type 001	Transaction ID : SE.140665 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 06 07 2022
Name of Federal Candidate: Matthews, Krystle, , ,			☒ Support ☐ Oppose Office Sought: ☐ House ☒ Senate ☐ President ☐ General District: _____ State: SC	
Calendar Year-To-Date Per Election for Office Sought			 1240.00 Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶ _____	

Full Name of Payee ☐ Memo Item TCC Consulting			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 06 07 2022	
Mailing Address 1325 St Andrews				
City Columbia	State SC	Zip Code 29210	Amount 440.00	
Purpose of Expenditure In person Canvassing			Category/Type 001	Transaction ID : SE.151280 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 06 07 2022
Name of Federal Candidate: Matthews, Krystle, , ,			☒ Support ☐ Oppose Office Sought: ☐ House ☒ Senate ☐ President ☐ General District: _____ State: SC	
Calendar Year-To-Date Per Election for Office Sought			 1680.00 Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	 880.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Boland, Michael, , ,

[Electronically Filed]

Date

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

07
20
2022

Signature

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ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE				FEC IDENTIFICATION NUMBER ▼ C C00606962	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee Texas Toolbelt			☐ Memo Item		
Mailing Address 6717 Mount Carmel Street			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 04 / 11 / 2022		
City Houston		State TX	Zip Code 77087		
Purpose of Expenditure In Person Canvassing		Category/ Type 001		Amount 116740.33	
Name of Federal Candidate: Cisneros, Jessica, , ,			☒ Support ☐ Oppose Office Sought: ☒ House ☐ Senate ☐ President District: 28 State: TX		
Calendar Year-To-Date Per Election for Office Sought 557221.47			Disbursement For: ☐ Primary ☐ General 2022 ☒ Other (specify) ▶ Runoff		
Full Name of Payee Texas Toolbelt			☒ Memo Item		
Mailing Address 6717 Mount Carmel Street			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 04 / 10 / 2022		
City Houston		State TX	Zip Code 77087		
Purpose of Expenditure In Person Canvassing		Category/ Type 001		Amount 116740.33	
Name of Federal Candidate: Cisneros, Jessica, , ,			☒ Support ☐ Oppose Office Sought: ☒ House ☐ Senate ☐ President District: 28 State: TX		
Calendar Year-To-Date Per Election for Office Sought 557221.47			Disbursement For: ☐ Primary ☐ General 2022 ☒ Other (specify) ▶ Runoff		
(a) SUBTOTAL of Itemized Independent Expenditures 116740.33					
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Boland, Michael, , ,</u>			Date M M / D D / Y Y Y Y Y Y 07 / 20 / 2022		

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE				FEC IDENTIFICATION NUMBER ▼ C C00606962	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on				M M / D D / Y Y Y Y Y	
Full Name of Payee Top Marks LLC ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y		
Mailing Address 1835 7th St NW			Amount 200000.00		
City Washington	State DC	Zip Code 20001	Transaction ID : SE.136810 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y		
Purpose of Expenditure Digital Ads		Category/Type 006	M M / D D / Y Y Y Y Y		
Name of Federal Candidate: VILLEGAS, GILBERT, , ,			Office Sought: ☒ House District: 03 ☐ President ☐ Senate State: IL		
Calendar Year-To-Date Per Election for Office Sought 400000.00			Disbursement For: ☒ Primary ☐ General 2022 ☐ Other (specify) ▶		
Full Name of Payee Top Marks LLC ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y		
Mailing Address 1835 7th St NW			Amount 200000.00		
City Washington	State DC	Zip Code 20001	Transaction ID : SE.149392 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y		
Purpose of Expenditure TV Ads		Category/Type 006	M M / D D / Y Y Y Y Y		
Name of Federal Candidate: VILLEGAS, GILBERT, , ,			Office Sought: ☒ House District: 03 ☐ President ☐ Senate State: IL		
Calendar Year-To-Date Per Election for Office Sought 600000.00			Disbursement For: ☒ Primary ☐ General 2022 ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			400000.00		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Boland, Michael, , ,</u>			Date M M / D D / Y Y Y Y Y		

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE				FEC IDENTIFICATION NUMBER ▼ C C00606962	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on MM / DD / YYYY					
Full Name of Payee ☐ Memo Item Turn it Blue				Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address 780 Utica Ave				Amount 10000.00	
City Coulder		State CO		Zip Code 80304	
Purpose of Expenditure Digital Ads				Category/Type 001	
Name of Federal Candidate: Cisneros, Jessica, ,				Office Sought: ☒ House District: <u>28</u> ☐ President ☐ Senate State: <u>TX</u>	
Calendar Year-To-Date Per Election for Office Sought 279170.59				Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
Full Name of Payee ☒ Memo Item Turn it Blue				Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address 780 Utica Ave				Amount 10000.00	
City Coulder		State CO		Zip Code 80304	
Purpose of Expenditure Digital Ads				Category/Type 001	
Name of Federal Candidate: Cisneros, Jessica, ,				Office Sought: ☒ House District: <u>28</u> ☐ President ☐ Senate State: <u>TX</u>	
Calendar Year-To-Date Per Election for Office Sought 279170.59				Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures 10000.00 					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Boland, Michael, , ,</u>				Date MM / DD / YYYY 07 20 2022	

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WORKING FAMILIES PARTY NATIONAL POLITICAL ACTION COMMITTEE				FEC IDENTIFICATION NUMBER ▼ C C00606962	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee Union Copy Center ☒ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 06 / 30 / 2022		
Mailing Address 6603 West Oklahoma Drive			Amount 1000.00		
City Milwaukee	State WI	Zip Code 52319	Transaction ID : SE.151246		
Purpose of Expenditure Shirts		Category/Type 006	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 06 / 01 / 2022		
Name of Federal Candidate: BARNES, MANDELA, , , ☒ Support ☐ Oppose			Office Sought: ☐ House ☒ Senate ☐ President ☐ District: State: WI		
Calendar Year-To-Date Per Election for Office Sought 94934.41			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶		
Full Name of Payee Union Copy Center ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 06 / 30 / 2022		
Mailing Address 6603 West Oklahoma Drive			Amount 833.45		
City Milwaukee	State WI	Zip Code 52319	Transaction ID : SE.151253		
Purpose of Expenditure Shirts - estimated as \$1k in 24 hour report		Category/Type 006	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 06 / 01 / 2022		
Name of Federal Candidate: BARNES, MANDELA, , , ☒ Support ☐ Oppose			Office Sought: ☐ House ☒ Senate ☐ President ☐ District: State: WI		
Calendar Year-To-Date Per Election for Office Sought 94934.41			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			833.45		
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures			582150.60		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Boland, Michael, , ,		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 07 / 20 / 2022	