

# 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.

ADDRESS (number and street)   
  
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

### 4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

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

- (b) Monthly Report Due On:
- |                                      |                                      |                                       |  |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)  | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)  | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE)                           |

- (c) 12-Day PRE-Election Report for the:
- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) |                                       |

Election on  /  /  in the State of

- (d) 30-Day POST-Election Report for the:
- |   |                                       |  |
|---|---------------------------------------|--|
| <input checked="" type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|---|---------------------------------------|--|

Election on  /  /  in the State of

5. Covering Period  /  /  through  /  /

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

Type or Print Name of Treasurer

Signature of Treasurer  Date  /  /

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									
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

**YOUTH PROGRESSIVE ACTION CATALYST**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2024"/>	<input type="text" value="15347.68"/>	<input type="text" value="15347.68"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="87791.81"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="208979.93"/>	<input type="text" value="608367.25"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="296771.74"/>	<input type="text" value="623714.93"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="184180.62"/>	<input type="text" value="511123.81"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="112591.12"/>	<input type="text" value="112591.12"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**YOUTH PROGRESSIVE ACTION CATALYST**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	46492.00	127956.00
(ii) Unitemized .....	84682.93	203478.69
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	131174.93	331434.69
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	5000.00	10000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	136174.93	341434.69
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).....	250.00	475.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	72555.00	266457.56
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)).....▶	208979.93	608367.25
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	208979.93	608367.25

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	69576.37	247444.77
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	69576.37	247444.77
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	26400.00	40250.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	88204.25	223429.04
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)) ..	184180.62	511123.81
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	184180.62	511123.81

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	136174.93	341434.69
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	136174.93	341434.69
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	69576.37	247444.77
37. Offsets to Operating Expenditures (from Line 15, page 3).....	250.00	475.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	69326.37	246969.77

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

Form/Schedule: F3XA  
Transaction ID :

In response to FEC Letter regarding report: 1) Report has been amended to correct this error 2) Report has been amended to correct this error 3) These contributions were received through a federa PAC as intermediary (ActBlue). It is our understanding that ActBlue has screened and confirmed the legality of these contributions 4) Post election payments on Line 23 were for canvassing for post-election ballot curing and were in connection with the general election and potential recount activity in connection with the general election.

Form/Schedule:  
Transaction ID:

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 301
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Aist, Mary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 409A Buttonwood Lane  
 City Hallam State PA Zip Code 17406  
 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 ▼ 207.00

Date of Receipt 11 / 24 / 2024  
**Transaction ID : SA11AI.41924**  
 Amount of Each Receipt this Period 23.00  
 Memo Item

**B. Allen, Edith, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 53 Richfield Road  
 City Arlington State MA Zip Code 02474  
 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 ▼ 500.00

Date of Receipt 10 / 17 / 2024  
**Transaction ID : SA11AI.41933**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Allen, Edith, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 53 Richfield Road  
 City Arlington State MA Zip Code 02474  
 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 ▼ 5000.00

Date of Receipt 10 / 17 / 2024  
**Transaction ID : SA11AI.41934**  
 Amount of Each Receipt this Period 4500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5023.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Andrews, Christine, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 605 S Alu Rd  
 City Wailuku State HI Zip Code 96793  
 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 ▼ 219.00

Date of Receipt  
 11 / 13 / 2024  
**Transaction ID : SA11Al.41970**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Andrews, Christine, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 605 S Alu Rd  
 City Wailuku State HI Zip Code 96793  
 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 ▼ 244.00

Date of Receipt  
 11 / 19 / 2024  
**Transaction ID : SA11Al.41971**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Andrews, Christine, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 605 S Alu Rd  
 City Wailuku State HI Zip Code 96793  
 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 ▼ 294.00

Date of Receipt  
 11 / 22 / 2024  
**Transaction ID : SA11Al.41972**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Ansara, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 225 Lowell St  
 City Carlisle State MA Zip Code 01741  
 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 ▼ 7000.00

Date of Receipt **10 / 18 / 2024**  
**Transaction ID : SA11AI.41977**  
 Amount of Each Receipt this Period 1500.00  
 Memo Item

**B. Aruffo, Sylvia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 215 Prospect Avenue  
 City Highland Park State IL Zip Code 60035  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSI Inc. Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **11 / 03 / 2024**  
**Transaction ID : SA11AI.41990**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Aruffo, Sylvia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 215 Prospect Avenue  
 City Highland Park State IL Zip Code 60035  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSI Inc. Occupation (for Individual) Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **11 / 20 / 2024**  
**Transaction ID : SA11AI.41991**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1850.00
<b>TOTAL</b> 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 301
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

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

**A. Banks, Hannah, , ,**

Mailing Address 107 Garland Rd

City Newton	State MA	Zip Code 02459
----------------	-------------	-------------------

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

Name of Employer (for Individual) retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
257.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 19 / 2024

**Transaction ID : SA11AI.42009**

Amount of Each Receipt this Period  
50.00

Memo Item

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

**B. Banks, Hannah, , ,**

Mailing Address 107 Garland Rd

City Newton	State MA	Zip Code 02459
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
274.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 26 / 2024

**Transaction ID : SA11AI.42010**

Amount of Each Receipt this Period  
17.00

Memo Item

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

**C. Banks, Hannah, , ,**

Mailing Address 107 Garland Rd

City Newton	State MA	Zip Code 02459
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
291.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2024

**Transaction ID : SA11AI.42011**

Amount of Each Receipt this Period  
17.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	84.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Banks, Hannah, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 09 / 2024 <b>Transaction ID : SA11AI.42012</b>		
Mailing Address 107 Garland Rd			Amount of Each Receipt this Period 50.00		
City Newton	State MA	Zip Code 02459	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) retired		Occupation (for Individual) Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 341.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Barringer, Paul, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 14 / 2024 <b>Transaction ID : SA11AI.42039</b>		
Mailing Address 1 Russell Street Unit 401			Amount of Each Receipt this Period 75.00		
City Cambridge	State MA	Zip Code 02140	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) Not Employed		Occupation (for Individual) Not Employed			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Bartovics, Susan, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 20 / 2024 <b>Transaction ID : SA11AI.42050</b>		
Mailing Address 273 North Shore Rd			Amount of Each Receipt this Period 250.00		
City North Haven	State ME	Zip Code 04853	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) Self		Occupation (for Individual) Farmer/environmentalist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 250.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	375.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Bartsch, William, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 13 / 2024 <b>Transaction ID : SA11AI.42051</b>
Mailing Address 78842 Kramer Drive		Amount of Each Receipt this Period 30.00
City Palm Desert	State CA	Zip Code 92211
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Baxter, Kathleen, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2024 <b>Transaction ID : SA11AI.42058</b>
Mailing Address 300 Caldecott Lane Unit 315		Amount of Each Receipt this Period 100.00
City Oakland	State CA	Zip Code 94618
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Business Wire	Occupation (for Individual) Technical Recruiter	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Baxter, Kathleen, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 05 / 2024 <b>Transaction ID : SA11AI.42059</b>
Mailing Address 300 Caldecott Lane Unit 315		Amount of Each Receipt this Period 100.00
City Oakland	State CA	Zip Code 94618
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Business Wire	Occupation (for Individual) Technical Recruiter	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 340.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	230.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 301
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Beard, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1528 Nicholas Way  
 City Sandpoint State ID Zip Code 83864  
 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 M / D D D / Y Y Y Y Y Y  
 11 / 17 / 2024  
**Transaction ID : SA11AI.42064**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**B. Bell, Stewart, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 240 Lincoln St  
 City Astoria State OR Zip Code 97103  
 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 ▼ 1650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 09 / 2024  
**Transaction ID : SA11AI.42073**  
 Amount of Each Receipt this Period  
 150.00  
 Memo Item

**C. Berger, Richard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2131 Chateau Place  
 City Livermore State CA Zip Code 94550  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lawrence Livermore Natl Lab Occupation (for Individual) Physicist  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 20 / 2024  
**Transaction ID : SA11AI.42095**  
 Amount of Each Receipt this Period  
 105.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	305.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 301
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Bernstein, Julie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2 Oak Circle  
 City Dover State MA Zip Code 02030  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not employed Occupation (for Individual) Not employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 27 / 2024  
**Transaction ID : SA11AI.42107**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Bernstein, Julie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2 Oak Circle  
 City Dover State MA Zip Code 02030  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not employed Occupation (for Individual) Not employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 04 / 2024  
**Transaction ID : SA11AI.42108**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Blick, Suzanne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3916 N Potsdam Ave #8093  
 City Sioux Falls State SD Zip Code 57104  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) self Occupation (for Individual) truck driver  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 257.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2024  
**Transaction ID : SA11AI.42134**  
 Amount of Each Receipt this Period 76.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	126.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Blick, Suzanne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3916 N Potsdam Ave #8093

City Sioux Falls	State SD	Zip Code 57104
---------------------	-------------	-------------------

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

Name of Employer (for Individual) self	Occupation (for Individual) truck driver
--	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
307.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 10 / 2024  
**Transaction ID : SA11AI.42135**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. Blick, Suzanne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3916 N Potsdam Ave #8093

City Sioux Falls	State SD	Zip Code 57104
---------------------	-------------	-------------------

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

Name of Employer (for Individual) self	Occupation (for Individual) truck driver
--	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
357.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 12 / 2024  
**Transaction ID : SA11AI.42136**

Amount of Each Receipt this Period  
50.00

Memo Item

**C. Blick, Suzanne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3916 N Potsdam Ave #8093

City Sioux Falls	State SD	Zip Code 57104
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) self	Occupation (for Individual) truck driver
--	--

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
374.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 17 / 2024  
**Transaction ID : SA11AI.42137**

Amount of Each Receipt this Period  
17.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	117.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Blink, Suzanne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3916 N Potsdam Ave #8093

City Sioux Falls	State SD	Zip Code 57104
---------------------	-------------	-------------------

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

Name of Employer (for Individual) self	Occupation (for Individual) truck driver
---	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
391.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 18 / 2024  
**Transaction ID : SA11AI.42138**

Amount of Each Receipt this Period  
 17.00

Memo Item

**B. Blink, Suzanne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3916 N Potsdam Ave #8093

City Sioux Falls	State SD	Zip Code 57104
---------------------	-------------	-------------------

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

Name of Employer (for Individual) self	Occupation (for Individual) truck driver
---	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
441.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 18 / 2024  
**Transaction ID : SA11AI.42139**

Amount of Each Receipt this Period  
 50.00

Memo Item

**C. Blink, Suzanne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3916 N Potsdam Ave #8093

City Sioux Falls	State SD	Zip Code 57104
---------------------	-------------	-------------------

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

Name of Employer (for Individual) self	Occupation (for Individual) truck driver
---	---

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
491.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 21 / 2024  
**Transaction ID : SA11AI.42140**

Amount of Each Receipt this Period  
 50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	117.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 301
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Blumenfeld, Gina, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7010 Waring Ave  
 City Los Angeles State CA Zip Code 90038  
 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 ▼ 235.00

Date of Receipt  
 11 / 04 / 2024  
**Transaction ID : SA11AI.42148**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Bolan, Nancy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Parkway West  
 City Mount Vernon State NY Zip Code 10552  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) World Vision Occupation (for Individual) Public Health  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
 11 / 13 / 2024  
**Transaction ID : SA11AI.42154**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Bolton, Kate, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 123 Howard St.  
 City Petaluma State CA Zip Code 94952  
 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  
 11 / 01 / 2024  
**Transaction ID : SA11AI.42155**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	95.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Bonin, Richard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11435 Daykin Drive  
 City St. Louis State MO Zip Code 63146  
 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 ▼ 1100.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 10 / 2024  
**Transaction ID : SA11AI.42158**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**B. Boone, Jennifer, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 57 Lorimer Avenue  
 City Providence State RI Zip Code 02906  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) self Occupation (for Individual) writer/editor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 29 / 2024  
**Transaction ID : SA11AI.42161**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

**C. Borges, Kent, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 975 Terrace Circle  
 City Colorado Springs State CO Zip Code 80904  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) None Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 09 / 2024  
**Transaction ID : SA11AI.42165**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 301
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Bradus, Richard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2028 Scott St. #202  
 City San Francisco State CA Zip Code 94115  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) self Occupation (for Individual) Physician  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
 11 / 13 / 2024  
**Transaction ID : SA11AI.42186**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. briskin, richard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 360 Dolan Avenue  
 City Mill Valley State CA Zip Code 94941  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not employed Occupation (for Individual) self employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 11 / 03 / 2024  
**Transaction ID : SA11AI.42202**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. Brocius, Pamela, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 340 E. 93rd St 14M  
 City New York State NY Zip Code 10128  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) self Occupation (for Individual) staffing  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 11 / 20 / 2024  
**Transaction ID : SA11AI.42207**  
 Amount of Each Receipt this Period 150.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	275.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Burns, Phoebe, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 193 Osborn St  
 City Philadelphia State PA Zip Code 19128  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) International SOS Occupation (for Individual) Data Analyst  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 30 / 2024  
**Transaction ID : SA11AI.42235**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Butler, Hillary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 21 Charlton Street  
 City New York State NY Zip Code 10014  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) self Occupation (for Individual) psychotherapist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 01 / 2024  
**Transaction ID : SA11AI.42242**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Butler, Hillary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 21 Charlton Street  
 City New York State NY Zip Code 10014  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) self Occupation (for Individual) psychotherapist  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 01 / 2024  
**Transaction ID : SA11AI.42243**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	70.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Caniglia, Stephen, , ,</b>			Date of Receipt MM / DD / YYYY 11 / 05 / 2024 <b>Transaction ID : SA11AI.42269</b>		
Mailing Address 334 East Medlock Drive			Amount of Each Receipt this Period 100.00		
City Phoenix	State AZ	Zip Code 85012	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 300.00		
Name of Employer (for Individual) Realty Executives		Occupation (for Individual) Realtor			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. carlson, carol, , ,</b>			Date of Receipt MM / DD / YYYY 10 / 30 / 2024 <b>Transaction ID : SA11AI.42274</b>		
Mailing Address box 328			Amount of Each Receipt this Period 100.00		
City Mt Jewett	State PA	Zip Code 16740	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 350.00		
Name of Employer (for Individual) episcopal church		Occupation (for Individual) priest			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. carlson, carol, , ,</b>			Date of Receipt MM / DD / YYYY 11 / 11 / 2024 <b>Transaction ID : SA11AI.42275</b>		
Mailing Address box 328			Amount of Each Receipt this Period 150.00		
City Mt Jewett	State PA	Zip Code 16740	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 500.00		
Name of Employer (for Individual) episcopal church		Occupation (for Individual) priest			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					

<b>SUBTOTAL</b> of Receipts This Page (optional).....	350.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. carlson, carol, , ,</b>			Date of Receipt M M / D D / Y Y Y Y 11 / 15 / 2024 <b>Transaction ID : SA11AI.42276</b>
Mailing Address box 328			Amount of Each Receipt this Period 111.00
City Mt Jewett	State PA	Zip Code 16740	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) episcopal church		Occupation (for Individual) priest	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 611.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. carlson, carol, , ,</b>			Date of Receipt M M / D D / Y Y Y Y 11 / 24 / 2024 <b>Transaction ID : SA11AI.42277</b>
Mailing Address box 328			Amount of Each Receipt this Period 50.00
City Mt Jewett	State PA	Zip Code 16740	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) episcopal church		Occupation (for Individual) priest	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 661.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. CHASE, CYNTHIA, , ,</b>			Date of Receipt M M / D D / Y Y Y Y 10 / 19 / 2024 <b>Transaction ID : SA11AI.42325</b>
Mailing Address 909 WYCKOFF RD			Amount of Each Receipt this Period 50.00
City ITHACA	State NY	Zip Code 14850	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Cornell u		Occupation (for Individual) professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 228.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	211.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 23 OF 301
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
CHASE, CYNTHIA, , ,

Mailing Address 909 WYCKOFF RD

City ITHACA	State NY	Zip Code 14850
----------------	-------------	-------------------

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

Name of Employer (for Individual) Cornell u	Occupation (for Individual) professor
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
263.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 21 / 2024

**Transaction ID : SA11AI.42326**

Amount of Each Receipt this Period  
35.00

Memo Item

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

Mailing Address 909 WYCKOFF RD

City ITHACA	State NY	Zip Code 14850
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Cornell u	Occupation (for Individual) professor
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 26 / 2024

**Transaction ID : SA11AI.42327**

Amount of Each Receipt this Period  
17.00

Memo Item

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

Mailing Address 909 WYCKOFF RD

City ITHACA	State NY	Zip Code 14850
----------------	-------------	-------------------

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

Name of Employer (for Individual) Cornell u	Occupation (for Individual) professor
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
297.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 04 / 2024

**Transaction ID : SA11AI.42328**

Amount of Each Receipt this Period  
17.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	69.00
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 24 OF 301
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
CHASE, CYNTHIA, , ,

Mailing Address 909 WYCKOFF RD

City ITHACA	State NY	Zip Code 14850
----------------	-------------	-------------------

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

Name of Employer (for Individual) Cornell u	Occupation (for Individual) professor
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
347.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2024

**Transaction ID : SA11AI.42329**

Amount of Each Receipt this Period  
50.00

Memo Item

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

Mailing Address 909 WYCKOFF RD

City ITHACA	State NY	Zip Code 14850
----------------	-------------	-------------------

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

Name of Employer (for Individual) Cornell u	Occupation (for Individual) professor
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
397.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2024

**Transaction ID : SA11AI.42330**

Amount of Each Receipt this Period  
50.00

Memo Item

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

Mailing Address 909 WYCKOFF RD

City ITHACA	State NY	Zip Code 14850
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Cornell u	Occupation (for Individual) professor
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
432.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2024

**Transaction ID : SA11AI.42331**

Amount of Each Receipt this Period  
35.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	135.00
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Chauncey-Allen, Lee, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 27 Saint Clements Rd  
 City Medford State MA Zip Code 02155  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Sonos Inc. Occupation (for Individual) Computer Programmer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 03 / 2024  
**Transaction ID : SA11AI.42334**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Choi, R. Leslie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1345 Daily Cir  
 City Glendale State CA Zip Code 91208-1719  
 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 ▼ 300.00

Date of Receipt 11 / 04 / 2024  
**Transaction ID : SA11AI.42346**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. Choi, R. Leslie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1345 Daily Cir  
 City Glendale State CA Zip Code 91208-1719  
 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 ▼ 350.00

Date of Receipt 11 / 10 / 2024  
**Transaction ID : SA11AI.42347**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	175.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Cohen, Naomi, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 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) Not Employed    Occupation (for Individual) Not Employed  
 Receipt For:  Primary     General     Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1850.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 20 / 2024  
**Transaction ID : SA11AI.42374**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**B. Cohen, Naomi, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 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) Not Employed    Occupation (for Individual) Not Employed  
 Receipt For:  Primary     General     Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1975.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 04 / 2024  
**Transaction ID : SA11AI.42375**  
 Amount of Each Receipt this Period  
 125.00  
 Memo Item

**C. Cohen, Naomi, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 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) Not Employed    Occupation (for Individual) Not Employed  
 Receipt For:  Primary     General     Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2035.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 12 / 2024  
**Transaction ID : SA11AI.42376**  
 Amount of Each Receipt this Period  
 60.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	285.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Cohen, Naomi, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 18 / 2024 <b>Transaction ID : SA11AI.42377</b>		
Mailing Address POB 39			Amount of Each Receipt this Period 125.00		
City Gap Mills	State WV	Zip Code 24941	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) Not Employed		Occupation (for Individual) Not Employed			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2160.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Cohen, Sara, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 03 / 2024 <b>Transaction ID : SA11AI.42378</b>		
Mailing Address 42 Arlington st.			Amount of Each Receipt this Period 90.00		
City Medford	State MA	Zip Code 02155	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) Commonwealth of MA		Occupation (for Individual) Environmental Analyst			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 480.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Cohen, Sara, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 10 / 2024 <b>Transaction ID : SA11AI.42379</b>		
Mailing Address 42 Arlington st.			Amount of Each Receipt this Period 50.00		
City Medford	State MA	Zip Code 02155	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) Commonwealth of MA		Occupation (for Individual) Environmental Analyst			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 530.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	265.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Cohen, Sara, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 12 / 2024 <b>Transaction ID : SA11AI.42380</b>
Mailing Address 42 Arlington st.			Amount of Each Receipt this Period 25.00
City Medford	State MA	Zip Code 02155	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) Commonwealth of MA		Occupation (for Individual) Environmental Analyst	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 555.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Crowe, John, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 18 / 2024 <b>Transaction ID : SA11AI.42440</b>
Mailing Address 1111 Cottonwood ct			Amount of Each Receipt this Period 50.00
City Davis	State CA	Zip Code 95618	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) Not Employed		Occupation (for Individual) Not Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Crowe, John, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 19 / 2024 <b>Transaction ID : SA11AI.42441</b>
Mailing Address 1111 Cottonwood ct			Amount of Each Receipt this Period 50.00
City Davis	State CA	Zip Code 95618	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) Not Employed		Occupation (for Individual) Not Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 270.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Dash, Robert, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 08 / 2024 <b>Transaction ID : SA11AI.42474</b>
Mailing Address PO Box 88			Amount of Each Receipt this Period 50.00
City Deer Harbor	State WA	Zip Code 98243	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) Not Employed		Occupation (for Individual) Not Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Dash, Robert, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 18 / 2024 <b>Transaction ID : SA11AI.42475</b>
Mailing Address PO Box 88			Amount of Each Receipt this Period 25.00
City Deer Harbor	State WA	Zip Code 98243	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) Not Employed		Occupation (for Individual) Not Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 375.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. DeLong, Margaret Macy, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2024 <b>Transaction ID : SA11AI.42505</b>
Mailing Address 54 Fisher Rd			Amount of Each Receipt this Period 250.00
City Arlington	State MA	Zip Code 02476	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) Not Employed		Occupation (for Individual) Not Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	325.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. DeLong, Margaret Macy, , ,**

Mailing Address 54 Fisher Rd

City Arlington	State MA	Zip Code 02476
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	18	/	2024

**Transaction ID : SA11AI.42506**

Amount of Each Receipt this Period  
250.00

Memo Item

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

Mailing Address 4420 N Clybourn Ave

City Burbank	State CA	Zip Code 91505
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) self	Occupation (for Individual) writer
---	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3800.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2024

**Transaction ID : SA11AI.42537**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

Mailing Address 4420 N Clybourn Ave

City Burbank	State CA	Zip Code 91505
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) self	Occupation (for Individual) writer
---	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
4800.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2024

**Transaction ID : SA11AI.42538**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2250.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Dooley, Winifred, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4420 N Clybourn Ave  
 City Burbank State CA Zip Code 91505  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) self Occupation (for Individual) writer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4970.00

Date of Receipt 11 / 19 / 2024  
**Transaction ID : SA11AI.42539**  
 Amount of Each Receipt this Period 170.00  
 Memo Item

**B. Dorwick, Keith, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 523 Roosevelt Street  
 City Lafayette State LA Zip Code 70503  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) u. of Louisiana at Lafayette Occupation (for Individual) educator  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt 10 / 23 / 2024  
**Transaction ID : SA11AI.42542**  
 Amount of Each Receipt this Period 17.00  
 Memo Item

**C. Dorwick, Keith, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 523 Roosevelt Street  
 City Lafayette State LA Zip Code 70503  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) u. of Louisiana at Lafayette Occupation (for Individual) educator  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 620.00

Date of Receipt 10 / 24 / 2024  
**Transaction ID : SA11AI.42543**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	237.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Dorwick, Keith, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 523 Roosevelt Street  
 City Lafayette State LA Zip Code 70503  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) u. of Louisiana at Lafayette Occupation (for Individual) educator  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 645.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 01 / 2024  
**Transaction ID : SA11AI.42545**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Dorwick, Keith, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 523 Roosevelt Street  
 City Lafayette State LA Zip Code 70503  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) u. of Louisiana at Lafayette Occupation (for Individual) educator  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 695.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 17 / 2024  
**Transaction ID : SA11AI.42546**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Dorwick, Keith, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 523 Roosevelt Street  
 City Lafayette State LA Zip Code 70503  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) u. of Louisiana at Lafayette Occupation (for Individual) educator  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 712.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 23 / 2024  
**Transaction ID : SA11AI.42547**  
 Amount of Each Receipt this Period 17.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	92.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Dorwick, Keith, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 24 / 2024 <b>Transaction ID : SA11AI.42548</b>
Mailing Address 523 Roosevelt Street		Amount of Each Receipt this Period 50.00
City Lafayette	State LA	Memo Item <input type="checkbox"/>
Zip Code 70503		
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) u. of Louisiana at Lafayette	Occupation (for Individual) educator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 762.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Dragon, Carol, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 20 / 2024 <b>Transaction ID : SA11AI.42557</b>
Mailing Address 800 Deerfield Road #305		Amount of Each Receipt this Period 186.00
City Highland Park	State IL	Memo Item <input type="checkbox"/>
Zip Code 60035		
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 536.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Dragon, Carol, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 03 / 2024 <b>Transaction ID : SA11AI.42558</b>
Mailing Address 800 Deerfield Road #305		Amount of Each Receipt this Period 100.00
City Highland Park	State IL	Memo Item <input type="checkbox"/>
Zip Code 60035		
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 636.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	336.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Duncan, Jon B, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3338 Winchester Way  
 City Eugene State OR Zip Code 97401  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Veterinarian  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt 11 / 18 / 2024  
**Transaction ID : SA11AI.42570**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**B. Edwards, Jon, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 715  
 City South Freeport State ME Zip Code 04078  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 15 / 2024  
**Transaction ID : SA11AI.42595**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Eger, 14 Craven Ln, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 14 Craven Ln  
 City White Plains State NY Zip Code 10605-3312  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 13 / 2024  
**Transaction ID : SA11AI.42600**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	305.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Elliott, R Bruce, , ,

Mailing Address 3115 Darvany Drive

City Dallas	State TX	Zip Code 75220
----------------	-------------	-------------------

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

Name of Employer (for Individual) none	Occupation (for Individual) Self
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2024

**Transaction ID : SA11AI.42607**

Amount of Each Receipt this Period  
250.00

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Elliott, R Bruce, , ,

Mailing Address 3115 Darvany Drive

City Dallas	State TX	Zip Code 75220
----------------	-------------	-------------------

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

Name of Employer (for Individual) none	Occupation (for Individual) Self
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2024

**Transaction ID : SA11AI.42608**

Amount of Each Receipt this Period  
250.00

Memo Item

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

Mailing Address 1431 W. Fourth

City Kuna	State ID	Zip Code 83634
--------------	-------------	-------------------

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 ▼  
270.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2024

**Transaction ID : SA11AI.42648**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	600.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Faissler, Diane G., , ,**

Mailing Address 4 Darby Lane

City Rockport	State MA	Zip Code 01966
------------------	-------------	-------------------

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

Name of Employer (for Individual) self	Occupation (for Individual) none
---	-------------------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 03 / 2024

**Transaction ID : SA11AI.42651**

Amount of Each Receipt this Period  
250.00

Memo Item

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

Mailing Address 7333 Scotland Way Unit 2209

City Sarasota	State FL	Zip Code 34238
------------------	-------------	-------------------

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 ▼  
275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 02 / 2024

**Transaction ID : SA11AI.42654**

Amount of Each Receipt this Period  
50.00

Memo Item

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

Mailing Address 7333 Scotland Way Unit 2209

City Sarasota	State FL	Zip Code 34238
------------------	-------------	-------------------

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 ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 04 / 2024

**Transaction ID : SA11AI.42655**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	325.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 301
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Feldman, Andrew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4850 38th Ave SW  
 City Seattle State WA Zip Code 98126  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Starbucks Occupation (for Individual) Software Developer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 10 / 21 / 2024  
**Transaction ID : SA11AI.42670**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. Feldman, Andrew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4850 38th Ave SW  
 City Seattle State WA Zip Code 98126  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Starbucks Occupation (for Individual) Software Developer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 10 / 29 / 2024  
**Transaction ID : SA11AI.42671**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. Fernald, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6159 NE COPPER BEECH DR.  
 City Hillsboro State OR Zip Code 97124  
 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 ▼ 770.00

Date of Receipt 10 / 28 / 2024  
**Transaction ID : SA11AI.42674**  
 Amount of Each Receipt this Period 170.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	370.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 301
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Flitner, Cara, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2 Mountain West Drive Unit 24  
 City Wolfeboro State NH Zip Code 03894  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) American Airlines Occupation (for Individual) Pilot  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 23 / 2024  
**Transaction ID : SA11AI.42705**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Fluhrer, Patricia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1068 N Eagle Hollow Rd  
 City Green Valley State AZ Zip Code 85614-6086  
 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 ▼ 4250.00

Date of Receipt 10 / 20 / 2024  
**Transaction ID : SA11AI.42710**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Fluhrer, Patricia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1068 N Eagle Hollow Rd  
 City Green Valley State AZ Zip Code 85614-6086  
 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 ▼ 4750.00

Date of Receipt 10 / 24 / 2024  
**Transaction ID : SA11AI.42711**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	800.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Fluhrer, Patricia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1068 N Eagle Hollow Rd  
 City Green Valley State AZ Zip Code 85614-6086  
 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 ▼ 5000.00

Date of Receipt 11 / 03 / 2024  
**Transaction ID : SA11AI.42712**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Foulke, Tim, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2434 N. E. 36th Ave.  
 City Portland State OR Zip Code 97212  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Nurse practitioner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 15 / 2024  
**Transaction ID : SA11AI.42726**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Franklin, Daniel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 20 Garfield Rd  
 City Melrose State MA Zip Code 02176  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Sandbox Networks Occupation (for Individual) Software Engineer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 11 / 07 / 2024  
**Transaction ID : SA11AI.42737**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	325.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 40 OF 301
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Garber, Connie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 102 Jellerson Rd  
 City Sanford State ME Zip Code 04073  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 210.48

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 24 / 2024  
**Transaction ID : SA11AI.42774**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**B. Garber, Connie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 102 Jellerson Rd  
 City Sanford State ME Zip Code 04073  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 250.48

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2024  
**Transaction ID : SA11AI.42775**  
 Amount of Each Receipt this Period  
 40.00  
 Memo Item

**C. Garber, Connie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 102 Jellerson Rd  
 City Sanford State ME Zip Code 04073  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 300.48

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 03 / 2024  
**Transaction ID : SA11AI.42776**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	115.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 301
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Garber, Connie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 102 Jellerson Rd  
 City Sanford State ME Zip Code 04073  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 317.48

Date of Receipt  
 11 / 10 / 2024  
**Transaction ID : SA11AI.42777**  
 Amount of Each Receipt this Period 17.00  
 Memo Item

**B. Garber, Connie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 102 Jellerson Rd  
 City Sanford State ME Zip Code 04073  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 334.48

Date of Receipt  
 11 / 19 / 2024  
**Transaction ID : SA11AI.42778**  
 Amount of Each Receipt this Period 17.00  
 Memo Item

**C. Gardner, Jan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3 Ponderosa Lane  
 City Palos Verdes Peninsula State CA Zip Code 90274  
 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 ▼ 300.00

Date of Receipt  
 11 / 09 / 2024  
**Transaction ID : SA11AI.42786**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	134.00
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 301
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Gardner, Jan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3 Ponderosa Lane  
 City Palos Verdes Peninsula State CA Zip Code 90274  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 18 / 2024  
**Transaction ID : SA11AI.42787**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. Gefvert, Cynthia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2205 Cebolla Creek Way NW  
 City Albuquerque State NM Zip Code 87120  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 20 / 2024  
**Transaction ID : SA11AI.42805**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. Goldware, Marjorie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 669 MONTEZUMA CT  
 City WALNUT CREEK State CA Zip Code 94598  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 30 / 2024  
**Transaction ID : SA11AI.42837**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	225.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Gonzalez, Jose, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 03 / 2024 <b>Transaction ID : SA11AI.42843</b>		
Mailing Address P. O. Box 65146			Amount of Each Receipt this Period 250.00		
City Tucson	State AZ	Zip Code 85728	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) Not Employed		Occupation (for Individual) Not Employed			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Gonzalez, Jose, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 05 / 2024 <b>Transaction ID : SA11AI.42844</b>		
Mailing Address P. O. Box 65146			Amount of Each Receipt this Period 250.00		
City Tucson	State AZ	Zip Code 85728	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) Not Employed		Occupation (for Individual) Not Employed			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Gray, Randy, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 25 / 2024 <b>Transaction ID : SA11AI.42866</b>		
Mailing Address 3535 Linda Vista Dr			Amount of Each Receipt this Period 50.00		
City San Marcos	State CA	Zip Code 92078	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) Not Employed		Occupation (for Individual) Not Employed			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 500.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	550.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Guzzardo, Chris, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13811 64th PI NE  
 City Kirkland State WA Zip Code 98034  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Windermere RE Occupation (for Individual) Real Estate Managing Broker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 03 / 2024  
**Transaction ID : SA11AI.42902**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Hanau, Paul, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1089 SW Westwood Dr  
 City Portland State OR Zip Code 97239  
 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 ▼ 235.00

Date of Receipt 11 / 05 / 2024  
**Transaction ID : SA11AI.42921**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Hanau, Paul, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1089 SW Westwood Dr  
 City Portland State OR Zip Code 97239  
 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 ▼ 285.00

Date of Receipt 11 / 17 / 2024  
**Transaction ID : SA11AI.42922**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	600.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 301
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Hardenburg, Harrison, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15 chestnut st apt 321  
 City elyria State OH Zip Code 44035  
 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 ▼ 450.00

Date of Receipt 10 / 18 / 2024  
**Transaction ID : SA11AI.42930**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Harris, Burt, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 316 Alta Ave.  
 City Santa Monica State CA Zip Code 90402  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Harrscope Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 11 / 05 / 2024  
**Transaction ID : SA11AI.42936**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Harris, Burt, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 316 Alta Ave.  
 City Santa Monica State CA Zip Code 90402  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Harrscope Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 3250.00

Date of Receipt 11 / 05 / 2024  
**Transaction ID : SA11AI.42937**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	550.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. henkin, michelle, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 01 / 2024 <b>Transaction ID : SA11AI.42986</b>
Mailing Address 15 Pipers Way		Amount of Each Receipt this Period 150.00
City New Harbor	State ME	Zip Code 04554
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) self	Occupation (for Individual) artist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 850.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. henkin, michelle, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 03 / 2024 <b>Transaction ID : SA11AI.42987</b>
Mailing Address 15 Pipers Way		Amount of Each Receipt this Period 500.00
City New Harbor	State ME	Zip Code 04554
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) self	Occupation (for Individual) artist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1350.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. henkin, michelle, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 09 / 2024 <b>Transaction ID : SA11AI.42988</b>
Mailing Address 15 Pipers Way		Amount of Each Receipt this Period 500.00
City New Harbor	State ME	Zip Code 04554
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) self	Occupation (for Individual) artist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1850.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1150.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. henkin, michelle, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15 Pipers Way  
 City New Harbor State ME Zip Code 04554  
 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 ▼ 1900.00

Date of Receipt  
 11 / 11 / 2024  
**Transaction ID : SA11AI.42989**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Hogan, Thomas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 0S505 Winfield Road  
 City Winfield State IL Zip Code 60190  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 10 / 31 / 2024  
**Transaction ID : SA11AI.43033**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Houlette, Ryan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11 Newman St  
 City Cambridge State MA Zip Code 02140  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Sense Labs Occupation (for Individual) software engineer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 11 / 01 / 2024  
**Transaction ID : SA11AI.43080**  
 Amount of Each Receipt this Period 17.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	317.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Houlette, Ryan, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 04 / 2024 <b>Transaction ID : SA11AI.43081</b>		
Mailing Address 11 Newman St			Amount of Each Receipt this Period 20.00		
City Cambridge	State MA	Zip Code 02140	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) Sense Labs		Occupation (for Individual) software engineer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 221.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Houlette, Ryan, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 09 / 2024 <b>Transaction ID : SA11AI.43082</b>		
Mailing Address 11 Newman St			Amount of Each Receipt this Period 17.00		
City Cambridge	State MA	Zip Code 02140	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) Sense Labs		Occupation (for Individual) software engineer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 238.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Houlette, Ryan, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 16 / 2024 <b>Transaction ID : SA11AI.43083</b>		
Mailing Address 11 Newman St			Amount of Each Receipt this Period 17.00		
City Cambridge	State MA	Zip Code 02140	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) Sense Labs		Occupation (for Individual) software engineer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 255.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	54.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Howard, Harrison, , ,</b>		Date of Receipt
Mailing Address 142 West End Ave. Apt. 23N		<input type="text" value="11"/> / <input type="text" value="03"/> / <input type="text" value="2024"/>
City New York City	State NY	Zip Code 10023
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.43084</b>
Name of Employer (for Individual) Not Employed		Amount of Each Receipt this Period <input type="text" value="250.00"/>
Occupation (for Individual) Not Employed		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Hubbell, Ellen, , ,</b>		Date of Receipt
Mailing Address 31 Pleasant St Unit54		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2024"/>
City Lebanon	State NH	Zip Code 03784
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.43086</b>
Name of Employer (for Individual) Dartmouth Hitchcock Med Center		Amount of Each Receipt this Period <input type="text" value="17.00"/>
Occupation (for Individual) RN Care Manager		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="242.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Hubbell, Ellen, , ,</b>		Date of Receipt
Mailing Address 31 Pleasant St Unit54		<input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2024"/>
City Lebanon	State NH	Zip Code 03784
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.43087</b>
Name of Employer (for Individual) Dartmouth Hitchcock Med Center		Amount of Each Receipt this Period <input type="text" value="50.00"/>
Occupation (for Individual) RN Care Manager		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="292.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="317.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 50 OF 301
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Hubbell, Ellen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 31 Pleasant St Unit54  
 City Lebanon State NH Zip Code 03784  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Dartmouth Hitchcock Med Center Occupation (for Individual) RN Care Manager  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 312.00

Date of Receipt 11 / 05 / 2024  
**Transaction ID : SA11AI.43088**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. Huggins, Lucinda, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 803 Warner Rd  
 City Schenectady State NY Zip Code 12309  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) not employed Occupation (for Individual) retired IT professional  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 19 / 2024  
**Transaction ID : SA11AI.43091**  
 Amount of Each Receipt this Period 45.00  
 Memo Item

**C. Iazzetta, Vincent, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 29 Franklin Street  
 City Annapolis State MD Zip Code 21401-2742  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Walker Engineering Occupation (for Individual) Engineer  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 31 / 2024  
**Transaction ID : SA11AI.43108**  
 Amount of Each Receipt this Period 150.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	215.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 51 OF 301
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Iazzetta, Vincent, , ,</b>			Date of Receipt
Mailing Address 29 Franklin Street			<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2024"/>
City Annapolis	State MD	Zip Code 21401-2742	<b>Transaction ID : SA11AI.43109</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="180.00"/>
Name of Employer (for Individual) Walker Engineering		Occupation (for Individual) Engineer	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="530.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Iazzetta, Vincent, , ,</b>			Date of Receipt
Mailing Address 29 Franklin Street			<input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2024"/>
City Annapolis	State MD	Zip Code 21401-2742	<b>Transaction ID : SA11AI.43110</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer (for Individual) Walker Engineering		Occupation (for Individual) Engineer	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="630.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Irwin, Ken, , ,</b>			Date of Receipt
Mailing Address 1229 W Roscoe St			<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2024"/>
City Chicago	State IL	Zip Code 60657	<b>Transaction ID : SA11AI.43115</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="250.00"/>
Name of Employer (for Individual) Not Employed		Occupation (for Individual) Not Employed	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ <input type="text" value="436.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="530.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 52 OF 301
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Irwin, Ken, , ,

Mailing Address 1229 W Roscoe St

City Chicago	State IL	Zip Code 60657
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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 ▼  
686.00

Date of Receipt  
11 / 01 / 2024  
Transaction ID : SA11AI.43116

Amount of Each Receipt this Period  
250.00

Memo Item

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

Mailing Address 1229 W Roscoe St

City Chicago	State IL	Zip Code 60657
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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 ▼  
936.00

Date of Receipt  
11 / 04 / 2024  
Transaction ID : SA11AI.43117

Amount of Each Receipt this Period  
250.00

Memo Item

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

Mailing Address 3011 42nd Street

City Gig Harbor	State WA	Zip Code 98335
--------------------	-------------	-------------------

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

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  
10 / 22 / 2024  
Transaction ID : SA11AI.43120

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1500.00
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 53 OF 301
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Jarecki, Gloria, , ,**

Mailing Address 10 Timber Trail

City Rye	State NY	Zip Code 10580
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) self	Occupation (for Individual) business exec.
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2024

**Transaction ID : SA11AI.43139**

Amount of Each Receipt this Period  
250.00

Memo Item

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

Mailing Address 10 Timber Trail

City Rye	State NY	Zip Code 10580
-------------	-------------	-------------------

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

Name of Employer (for Individual) self	Occupation (for Individual) business exec.
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2024

**Transaction ID : SA11AI.43140**

Amount of Each Receipt this Period  
250.00

Memo Item

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

Mailing Address 16134 Red Cedar Trl

City Dallas	State TX	Zip Code 75248
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self	Occupation (for Individual) Attorney
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2024

**Transaction ID : SA11AI.43161**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	525.00
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 54 OF 301
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Kane, Herald, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3540 W Sahara Ave #48  
 City Las Vegas State NV Zip Code 89102  
 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 ▼ 300.00

Date of Receipt  
 11 / 04 / 2024  
**Transaction ID : SA11AI.43193**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Kane, Herald, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3540 W Sahara Ave #48  
 City Las Vegas State NV Zip Code 89102  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 11 / 04 / 2024  
**Transaction ID : SA11AI.43194**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. Kasparian, Gail, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6604 Kalgan Rd.  
 City Rio Rancho State NM Zip Code 87144  
 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 ▼ 900.00

Date of Receipt  
 11 / 02 / 2024  
**Transaction ID : SA11AI.43207**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	325.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 55 OF 301
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Keelan, Helen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5941 Stoneview Dr.  
 City Culver City State CA Zip Code 90232  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Rite Aid Occupation (for Individual) Pharmacist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt **10 / 17 / 2024**  
**Transaction ID : SA11AI.43215**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. Keelan, Helen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5941 Stoneview Dr.  
 City Culver City State CA Zip Code 90232  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Rite Aid Occupation (for Individual) Pharmacist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt **11 / 02 / 2024**  
**Transaction ID : SA11AI.43216**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. Krawisz, Bruce, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1600 N Hills Dr.  
 City Marshfield State WI Zip Code 54449  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Marshfield Clinic Research Institute Occupation (for Individual) emeritus researcher  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt **10 / 20 / 2024**  
**Transaction ID : SA11AI.43309**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	400.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Krawisz, Bruce, , ,**

Mailing Address 1600 N Hills Dr.

City Marshfield	State WI	Zip Code 54449
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Marshfield Clinic Research Institute	Occupation (for Individual) emeritus researcher
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Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1100.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2024

**Transaction ID : SA11AI.43310**

Amount of Each Receipt this Period  
200.00

Memo Item

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

Mailing Address 1637 Carleton Ct.

City Redwood City	State CA	Zip Code 94061
----------------------	-------------	-------------------

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

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed
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Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
975.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2024

**Transaction ID : SA11AI.43328**

Amount of Each Receipt this Period  
300.00

Memo Item

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

Mailing Address 2630 NW 144TH AVE

City BEAVERTON	State OR	Zip Code 97006
-------------------	-------------	-------------------

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

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed
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Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2024

**Transaction ID : SA11AI.43332**

Amount of Each Receipt this Period  
35.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	535.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Lally, Helen, , ,</b>			Date of Receipt MM / DD / YYYY 11 / 04 / 2024 <b>Transaction ID : SA11AI.43341</b>		
Mailing Address 1220 Park Avenue			Amount of Each Receipt this Period 50.00		
City New York	State NY	Zip Code 10128	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 240.00			
Name of Employer (for Individual) Helen D. Lally Fine Arts		Occupation (for Individual) Consultant		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Lally, Helen, , ,</b>			Date of Receipt MM / DD / YYYY 11 / 05 / 2024 <b>Transaction ID : SA11AI.43342</b>		
Mailing Address 1220 Park Avenue			Amount of Each Receipt this Period 50.00		
City New York	State NY	Zip Code 10128	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 290.00			
Name of Employer (for Individual) Helen D. Lally Fine Arts		Occupation (for Individual) Consultant		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Lally, Helen, , ,</b>			Date of Receipt MM / DD / YYYY 11 / 10 / 2024 <b>Transaction ID : SA11AI.43343</b>		
Mailing Address 1220 Park Avenue			Amount of Each Receipt this Period 100.00		
City New York	State NY	Zip Code 10128	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 390.00			
Name of Employer (for Individual) Helen D. Lally Fine Arts		Occupation (for Individual) Consultant		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	200.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Lally, Helen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1220 Park Avenue  
 City New York State NY Zip Code 10128  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Helen D. Lally Fine Arts Occupation (for Individual) Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 11 / 14 / 2024  
**Transaction ID : SA11AI.43344**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Lally, Helen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1220 Park Avenue  
 City New York State NY Zip Code 10128  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Helen D. Lally Fine Arts Occupation (for Individual) Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt 11 / 20 / 2024  
**Transaction ID : SA11AI.43345**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Lancaric, Eugene, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 27 Prospect Park West  
 City Brooklyn State NY Zip Code 11215  
 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 ▼ 270.00

Date of Receipt 11 / 20 / 2024  
**Transaction ID : SA11AI.43362**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	200.00
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 59 OF 301
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Latham, Alida, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2208 Fairview Ave East  
 City Seattle State WA Zip Code 98102  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) self Occupation (for Individual) photographer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **10 / 28 / 2024**  
**Transaction ID : SA11Al.43384**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Latham, Alida, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2208 Fairview Ave East  
 City Seattle State WA Zip Code 98102  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) self Occupation (for Individual) photographer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt **11 / 12 / 2024**  
**Transaction ID : SA11Al.43385**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Latham, Alida, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2208 Fairview Ave East  
 City Seattle State WA Zip Code 98102  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) self Occupation (for Individual) photographer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1750.00

Date of Receipt **11 / 15 / 2024**  
**Transaction ID : SA11Al.43386**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 60 OF 301
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Latham, Alida, , ,**

Mailing Address 2208 Fairview Ave East

City Seattle	State WA	Zip Code 98102
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) self	Occupation (for Individual) photographer
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 18 / 2024

**Transaction ID : SA11AI.43387**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address 5899 Lucas Valley Road

City Nicasio	State CA	Zip Code 94946
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 09 / 2024

**Transaction ID : SA11AI.43426**

Amount of Each Receipt this Period  
100.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Linderman, Christine E, , ,**

Mailing Address 277 Riverside Dr

City Florence	State MA	Zip Code 01062
------------------	-------------	-------------------

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 ▼  
835.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 22 / 2024

**Transaction ID : SA11AI.43438**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	650.00
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 301
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Linderman, Christine E, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 277 Riverside Dr  
 City Florence State MA Zip Code 01062  
 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 ▼ 885.00

Date of Receipt 11 / 02 / 2024  
**Transaction ID : SA11AI.43439**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Linderman, Christine E, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 277 Riverside Dr  
 City Florence State MA Zip Code 01062  
 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 ▼ 935.00

Date of Receipt 11 / 13 / 2024  
**Transaction ID : SA11AI.43440**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Ludi, Celia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 144 Camino de las Crucitas  
 City Santa Fe State NM Zip Code 87501  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 18 / 2024  
**Transaction ID : SA11AI.43490**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	125.00
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 301
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Ludi, Celia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 144 Camino de las Crucitas  
 City Santa Fe State NM Zip Code 87501  
 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 ▼ 275.00

Date of Receipt 11 / 18 / 2024  
**Transaction ID : SA11AI.43491**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Luksenburg, Lillian, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 609 Kemp Mill Forest Dr.  
 City Silver Spring State MD Zip Code 20902-1566  
 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 ▼ 1075.00

Date of Receipt 10 / 30 / 2024  
**Transaction ID : SA11AI.43492**  
 Amount of Each Receipt this Period 300.00  
 Memo Item

**C. Luksenburg, Lillian, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 609 Kemp Mill Forest Dr.  
 City Silver Spring State MD Zip Code 20902-1566  
 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 ▼ 1100.00

Date of Receipt 11 / 02 / 2024  
**Transaction ID : SA11AI.43493**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	350.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Luksenburg, Lillian, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 609 Kemp Mill Forest Dr.  
 City Silver Spring    State MD    Zip Code 20902-1566  
 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 ▼ 1200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 10 / 2024  
**Transaction ID : SA11AI.43494**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**B. Lung, Diane, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9936 Barranca Circle  
 City Huntington Beach    State CA    Zip Code 92646  
 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 ▼ 223.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 24 / 2024  
**Transaction ID : SA11AI.43501**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**C. Martin, Matt, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6392 Mesedge Drive  
 City COLORADO SPRINGS    State CO    Zip Code 80919  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Keysight Technologies    Occupation (for Individual) ASIC Designer  
 Receipt For:  Primary     General     Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 23 / 2024  
**Transaction ID : SA11AI.43569**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	150.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 301
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Martin, Matt, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6392 Mesedg Drive  
 City COLORADO SPRINGS State CO Zip Code 80919  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Keysight Technologies Occupation (for Individual) ASIC Designer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 23 / 2024  
**Transaction ID : SA11AI.43570**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Maul, Terry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. Box 635  
 City Tahoma State CA Zip Code 96142  
 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 ▼ 1360.00

Date of Receipt 10 / 19 / 2024  
**Transaction ID : SA11AI.43592**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Maul, Terry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. Box 635  
 City Tahoma State CA Zip Code 96142  
 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 ▼ 1410.00

Date of Receipt 10 / 25 / 2024  
**Transaction ID : SA11AI.43593**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 125.00  
**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: (check only one)	PAGE 65 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Maul, Terry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. Box 635  
 City Tahoma State CA Zip Code 96142  
 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 ▼ 1485.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 27 / 2024  
**Transaction ID : SA11AI.43594**  
 Amount of Each Receipt this Period  
 75.00  
 Memo Item

**B. Maul, Terry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. Box 635  
 City Tahoma State CA Zip Code 96142  
 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 ▼ 1560.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 30 / 2024  
**Transaction ID : SA11AI.43595**  
 Amount of Each Receipt this Period  
 75.00  
 Memo Item

**C. Maul, Terry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. Box 635  
 City Tahoma State CA Zip Code 96142  
 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 ▼ 1610.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 03 / 2024  
**Transaction ID : SA11AI.43596**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Maul, Terry, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 04 / 2024 <b>Transaction ID : SA11AI.43597</b>		
Mailing Address P.O. Box 635			Amount of Each Receipt this Period 30.00		
City Tahoma	State CA	Zip Code 96142	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) Not Employed		Occupation (for Individual) Not Employed			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1640.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. McCabe, Anne and William, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 09 / 2024 <b>Transaction ID : SA11AI.43614</b>		
Mailing Address 23 Walden Fields Dr			Amount of Each Receipt this Period 100.00		
City Delmar	State NY	Zip Code 12054	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) Not Employed		Occupation (for Individual) Not Employed			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. McCabe, Anne and William, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 20 / 2024 <b>Transaction ID : SA11AI.43615</b>		
Mailing Address 23 Walden Fields Dr			Amount of Each Receipt this Period 30.00		
City Delmar	State NY	Zip Code 12054	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) Not Employed		Occupation (for Individual) Not Employed			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 255.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	160.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Mead, Lucy, , ,</b>		Date of Receipt MM / DD / YYYY 10 / 19 / 2024 <b>Transaction ID : SA11AI.43689</b>
Mailing Address 630 Spyglass Dr.		Amount of Each Receipt this Period 90.00
City Eugene	State OR	Zip Code 97401
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Mead, Lucy, , ,</b>		Date of Receipt MM / DD / YYYY 10 / 22 / 2024 <b>Transaction ID : SA11AI.43690</b>
Mailing Address 630 Spyglass Dr.		Amount of Each Receipt this Period 100.00
City Eugene	State OR	Zip Code 97401
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Mead, Lucy, , ,</b>		Date of Receipt MM / DD / YYYY 11 / 03 / 2024 <b>Transaction ID : SA11AI.43691</b>
Mailing Address 630 Spyglass Dr.		Amount of Each Receipt this Period 50.00
City Eugene	State OR	Zip Code 97401
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 530.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	240.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Mead, Lucy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 630 Spyglass Dr.  
 City Eugene State OR Zip Code 97401  
 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 ▼ 580.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 14 / 2024  
**Transaction ID : SA11AI.43692**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**B. Mead, Lucy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 630 Spyglass Dr.  
 City Eugene State OR Zip Code 97401  
 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 ▼ 630.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 20 / 2024  
**Transaction ID : SA11AI.43693**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**C. Meerhof, Eveann, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4897 S Red Oaks Dr  
 City Traverse City State MI Zip Code 49685  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Interlochen Center for the Arts Occupation (for Individual) Accountant  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 17 / 2024  
**Transaction ID : SA11AI.43697**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Meerhof, Eveann, , ,</b>		Date of Receipt MM / DD / YYYY 11 / 17 / 2024 <b>Transaction ID : SA11AI.43698</b>
Mailing Address 4897 S Red Oaks Dr		Amount of Each Receipt this Period 25.00
City Traverse City	State MI	Zip Code 49685
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Interlochen Center for the Arts	Occupation (for Individual) Accountant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Mehl, Carter, , ,</b>		Date of Receipt MM / DD / YYYY 10 / 26 / 2024 <b>Transaction ID : SA11AI.43699</b>
Mailing Address 1054 Peralta Avenue		Amount of Each Receipt this Period 50.00
City Albany	State CA	Zip Code 94706
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1475.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Mehl, Carter, , ,</b>		Date of Receipt MM / DD / YYYY 11 / 03 / 2024 <b>Transaction ID : SA11AI.43700</b>
Mailing Address 1054 Peralta Avenue		Amount of Each Receipt this Period 50.00
City Albany	State CA	Zip Code 94706
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1525.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Mehl, Carter, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1054 Peralta Avenue  
 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 ▼ 1570.00

Date of Receipt 11 / 15 / 2024  
**Transaction ID : SA11AI.43701**  
 Amount of Each Receipt this Period 45.00  
 Memo Item

**B. Mehl, Carter, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1054 Peralta Avenue  
 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 ▼ 1620.00

Date of Receipt 11 / 20 / 2024  
**Transaction ID : SA11AI.43702**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Meighan, Patrick, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4111 Madison Ave  
 City Culver City State CA Zip Code 90232  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Fox/Disney Animation Occupation (for Individual) Writer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 10 / 24 / 2024  
**Transaction ID : SA11AI.43705**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	595.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Melloh, James, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 47 Sprague St.  
 City South Portland State ME Zip Code 04106  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) self Occupation (for Individual) acupuncture  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 320.00

Date of Receipt 10 / 20 / 2024  
**Transaction ID : SA11AI.43706**  
 Amount of Each Receipt this Period 220.00  
 Memo Item

**B. Menaker, Thomas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 27 High Tor Rd  
 City New City State NY Zip Code 10956  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) Self Occupation (for Individual) Psych  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 225.00

Date of Receipt 11 / 10 / 2024  
**Transaction ID : SA11AI.43714**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Miller, Mara, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2101 Nuuanu Ave. #201  
 City Honolulu State HI Zip Code 96817  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) self-employed Occupation (for Individual) writer  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 250.00

Date of Receipt 11 / 05 / 2024  
**Transaction ID : SA11AI.43747**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	520.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 301
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
minnich, ronald, , ,

Mailing Address 732 katrina st

City livermore	State CA	Zip Code 94550
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) google	Occupation (for Individual) swe
---	------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2024

**Transaction ID : SA11AI.43755**

Amount of Each Receipt this Period  
250.00

Memo Item

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

Mailing Address 1246 Ostrander Rd

City Kelso	State WA	Zip Code 98626
---------------	-------------	-------------------

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

Name of Employer (for Individual) UNM	Occupation (for Individual) business analyst
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
367.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2024

**Transaction ID : SA11AI.43756**

Amount of Each Receipt this Period  
17.00

Memo Item

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

Mailing Address 1246 Ostrander Rd

City Kelso	State WA	Zip Code 98626
---------------	-------------	-------------------

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

Name of Employer (for Individual) UNM	Occupation (for Individual) business analyst
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
387.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2024

**Transaction ID : SA11AI.43757**

Amount of Each Receipt this Period  
20.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	287.00
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. M Meeker, Diane, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 03 / 2024 <b>Transaction ID : SA11AI.43512</b>
Mailing Address 2000 W Business Loop 70 118		Amount of Each Receipt this Period 180.00
City COLUMBIA	State MO	Zip Code 65202
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 297.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Moyle, Nancy B, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 09 / 2024 <b>Transaction ID : SA11AI.43804</b>
Mailing Address 245 Currey Ln		Amount of Each Receipt this Period 200.00
City Sausalito	State CA	Zip Code 94965
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Moyle, Nancy B, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 09 / 2024 <b>Transaction ID : SA11AI.43805</b>
Mailing Address 245 Currey Ln		Amount of Each Receipt this Period 100.00
City Sausalito	State CA	Zip Code 94965
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	480.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 301
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Murphy, Kari, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4104 Rodstol Ln SE  
 City Port Orchard State WA Zip Code 98366  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Sandia National Labs Occupation (for Individual) Engineer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 438.00

Date of Receipt 10 / 18 / 2024  
**Transaction ID : SA11AI.43818**  
 Amount of Each Receipt this Period 45.00  
 Memo Item

**B. Neidorf, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5515 Calvin Ave  
 City Tarzana State CA Zip Code 91356  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Business Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 10 / 24 / 2024  
**Transaction ID : SA11AI.43846**  
 Amount of Each Receipt this Period 2000.00  
 Memo Item

**C. Nesbit, Julie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4205 Beresford Way  
 City La Canada Flintridge State CA Zip Code 91011  
 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 ▼ 240.00

Date of Receipt 11 / 02 / 2024  
**Transaction ID : SA11AI.43857**  
 Amount of Each Receipt this Period 90.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2135.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Nesbit, Julie, , ,</b>		Date of Receipt MM / DD / YYYY 11 / 04 / 2024 <b>Transaction ID : SA11AI.43858</b>
Mailing Address 4205 Beresford Way		Amount of Each Receipt this Period 100.00
City La Canada Flintridge	State CA	Zip Code 91011
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Nesbit, Julie, , ,</b>		Date of Receipt MM / DD / YYYY 11 / 15 / 2024 <b>Transaction ID : SA11AI.43859</b>
Mailing Address 4205 Beresford Way		Amount of Each Receipt this Period 50.00
City La Canada Flintridge	State CA	Zip Code 91011
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Nesbit, Julie, , ,</b>		Date of Receipt MM / DD / YYYY 11 / 17 / 2024 <b>Transaction ID : SA11AI.43860</b>
Mailing Address 4205 Beresford Way		Amount of Each Receipt this Period 50.00
City La Canada Flintridge	State CA	Zip Code 91011
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 440.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Newtown, Sheila, , ,

Mailing Address 3893 County Route 10

City DePeyster	State NY	Zip Code 13633
-------------------	-------------	-------------------

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

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
395.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	22	/	2024

**Transaction ID : SA11AI.43866**

Amount of Each Receipt this Period  
50.00

Memo Item

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

Mailing Address 3893 County Route 10

City DePeyster	State NY	Zip Code 13633
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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 ▼  
412.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2024

**Transaction ID : SA11AI.43867**

Amount of Each Receipt this Period  
17.00

Memo Item

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

Mailing Address 3893 County Route 10

City DePeyster	State NY	Zip Code 13633
-------------------	-------------	-------------------

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 ▼  
432.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2024

**Transaction ID : SA11AI.43868**

Amount of Each Receipt this Period  
20.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	87.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 301
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Nicholls, Rosalie, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 29 / 2024 <b>Transaction ID : SA11AI.43869</b>
Mailing Address 8207 Belclaire LN		Amount of Each Receipt this Period 35.00
City Austin	State TX	Zip Code 78748
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3018.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Nicholls, Rosalie, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 30 / 2024 <b>Transaction ID : SA11AI.43870</b>
Mailing Address 8207 Belclaire LN		Amount of Each Receipt this Period 25.00
City Austin	State TX	Zip Code 78748
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3043.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Nicholls, Rosalie, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 02 / 2024 <b>Transaction ID : SA11AI.43871</b>
Mailing Address 8207 Belclaire LN		Amount of Each Receipt this Period 50.00
City Austin	State TX	Zip Code 78748
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 3093.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	110.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Nicholls, Rosalie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8207 Belclaire LN  
 City Austin State TX Zip Code 78748  
 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 ▼ 3143.00

Date of Receipt 11 / 20 / 2024  
**Transaction ID : SA11AI.43872**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Norris, Peter, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 19 Blueberry Ridge Lane  
 City Chilmark State MA Zip Code 02535  
 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 ▼ 464.00

Date of Receipt 11 / 09 / 2024  
**Transaction ID : SA11AI.43894**  
 Amount of Each Receipt this Period 281.00  
 Memo Item

**C. Oelsner, Leslie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1451 Canterbury Rd.  
 City Fayetteville State AR Zip Code 72701  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) self Occupation (for Individual) social worker  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 825.00

Date of Receipt 10 / 24 / 2024  
**Transaction ID : SA11AI.43901**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	356.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Oelsner, Leslie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1451 Canterbury Rd.  
 City Fayetteville State AR Zip Code 72701  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) self Occupation (for Individual) social worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt  
 11 / 14 / 2024  
**Transaction ID : SA11AI.43902**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Oelsner, Leslie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1451 Canterbury Rd.  
 City Fayetteville State AR Zip Code 72701  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) self Occupation (for Individual) social worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt  
 11 / 24 / 2024  
**Transaction ID : SA11AI.43903**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Okamura, Alan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 98-516 A Kamahao Place  
 City Pearl City State HI Zip Code 96782  
 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  
 11 / 16 / 2024  
**Transaction ID : SA11AI.43907**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	75.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Okamura, Alan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 98-516 A Kamahao Place  
 City Pearl City State HI Zip Code 96782  
 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 ▼ 240.00

Date of Receipt  
 11 / 17 / 2024  
**Transaction ID : SA11AI.43908**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**B. Ornish, Dean, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 900 Bridgeway  
 City Sausalito State CA Zip Code 94965  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Preventive Medicine Research Institute Occupation (for Individual) physician  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 10 / 27 / 2024  
**Transaction ID : SA11AI.43935**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Ornish, Dean, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 900 Bridgeway  
 City Sausalito State CA Zip Code 94965  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Preventive Medicine Research Institute Occupation (for Individual) physician  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 11 / 03 / 2024  
**Transaction ID : SA11AI.43936**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	370.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 81 OF 301
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Paquette, Elissa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address #11 Pt. Sewall Rd.  
 City Wolfeboro State NH Zip Code 03894  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Salmon Press Occupation (for Individual) journalist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
 11 / 01 / 2024  
**Transaction ID : SA11AI.43951**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Parks, Lee, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 500 Porterford Rd  
 City Union State MO Zip Code 63084  
 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 ▼ 525.00

Date of Receipt  
 10 / 20 / 2024  
**Transaction ID : SA11AI.43952**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Parks, Lee, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 500 Porterford Rd  
 City Union State MO Zip Code 63084  
 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 ▼ 550.00

Date of Receipt  
 11 / 07 / 2024  
**Transaction ID : SA11AI.43953**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	75.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Parks, Lee, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 500 Porterford Rd  
 City Union    State MO    Zip Code 63084  
 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 ▼ 575.00

Date of Receipt 11 / 20 / 2024  
**Transaction ID : SA11AI.43954**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Passon, Gary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1390 S. Kihei Rd  
 City Kihei    State HI    Zip Code 96753  
 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 ▼ 300.00

Date of Receipt 10 / 24 / 2024  
**Transaction ID : SA11AI.43960**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

**C. Pearce, Mary Milburn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11115 NE 160th Pl  
 City Bothell    State WA    Zip Code 98011  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Norway Hill Business Solutions    Occupation (for Individual) Managing Partner  
 Receipt For:  Primary     General     Other (specify)  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 11 / 2024  
**Transaction ID : SA11AI.43972**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	250.00
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 301
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Permaul, Nadesan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 104 Cambridge Way  
 City Piedmont State CA Zip Code 94611  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 04 / 2024  
**Transaction ID : SA11AI.43989**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Perrigo, Carolyn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 106 Ticino Rd  
 City New Bern State NC Zip Code 28562  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 30 / 2024  
**Transaction ID : SA11AI.43991**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Perrigo, Carolyn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 106 Ticino Rd  
 City New Bern State NC Zip Code 28562  
 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 ▼ 325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2024  
**Transaction ID : SA11AI.43992**  
 Amount of Each Receipt this Period 75.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	150.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Perron, Elizabeth B., , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 37 North st.  
 City Andover State MA Zip Code 01810  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Nokia Corporation Occupation (for Individual) project mgr master data  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 04 / 2024  
**Transaction ID : SA11AI.43993**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Pipkin, Jon, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1305 Sweetwater Cove #101  
 City Naples State FL Zip Code 34110  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 12 / 2024  
**Transaction ID : SA11AI.44023**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. Pomeroy, Ellen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 60 East End Ave  
 City New York State NY Zip Code 10028  
 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 ▼ 550.00

Date of Receipt 10 / 25 / 2024  
**Transaction ID : SA11AI.44030**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	370.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 301
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Pomeroy, Ellen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 60 East End Ave  
 City New York State NY Zip Code 10028  
 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 ▼ 580.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2024  
**Transaction ID : SA11AI.44031**  
 Amount of Each Receipt this Period  
 30.00  
 Memo Item

**B. Pomeroy, Ellen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 60 East End Ave  
 City New York State NY Zip Code 10028  
 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 ▼ 680.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 03 / 2024  
**Transaction ID : SA11AI.44032**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**C. Pomeroy, Ellen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 60 East End Ave  
 City New York State NY Zip Code 10028  
 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 ▼ 700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 08 / 2024  
**Transaction ID : SA11AI.44033**  
 Amount of Each Receipt this Period  
 20.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	150.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Pomeroy, Ellen, , ,</b>			Date of Receipt
Mailing Address 60 East End Ave			<input type="text" value="11"/> / <input type="text" value="20"/> / <input type="text" value="2024"/>
City New York	State NY	Zip Code 10028	<b>Transaction ID : SA11AI.44034</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="50.00"/>
Name of Employer (for Individual) Not Employed		Occupation (for Individual) Not Employed	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="750.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Public Results LLC</b>			Date of Receipt
Mailing Address 2045 W. Grand Ave Suite B			<input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2024"/>
City Chicago	State IL	Zip Code 60612	<b>Transaction ID : SA11AI.45141</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="603.00"/>
Name of Employer (for Individual)		Occupation (for Individual)	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="603.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Landau, Yoni, , ,</b>			Date of Receipt
Mailing Address 2045 W. Grand Ave			<input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2024"/>
City Chicago	State IL	Zip Code 60612	<b>Transaction ID : SA11AI.45141.0</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="603.00"/>
Name of Employer (for Individual) Public Results LLC		Occupation (for Individual) Owner	<input checked="" type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="603.00"/>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="653.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 301
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Public Results LLC**

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

Mailing Address 2045 W. Grand Ave  
Suite B

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 ▼  
3603.00

Date of Receipt  
11 / 21 / 2024  
Transaction ID : SA11AI.45143

Amount of Each Receipt this Period  
3000.00

Memo Item

**B. Landau, Yoni, , ,**

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

Mailing Address 2045 W. Grand 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)  
Public Results LLC Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3603.00

Date of Receipt  
11 / 21 / 2024  
Transaction ID : SA11AI.45143.0

Amount of Each Receipt this Period  
3000.00

Memo Item

**C. Rafferty, John, , ,**

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

Mailing Address 17 Blueberry Hill Dr.

City Livingston Manor State NY Zip Code 12758

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  
11 / 01 / 2024  
Transaction ID : SA11AI.44066

Amount of Each Receipt this Period  
75.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3075.00

**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: (check only one)	PAGE 88 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Rafferty, Moira, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2024
Mailing Address 3214 Landon Street			<b>Transaction ID : SA11AI.44067</b>
City Lynchburg	State VA	Zip Code 24503	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Medical Associates of Central Virginia		Occupation (for Individual) physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Rafferty, Moira, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2024
Mailing Address 3214 Landon Street			<b>Transaction ID : SA11AI.44068</b>
City Lynchburg	State VA	Zip Code 24503	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Medical Associates of Central Virginia		Occupation (for Individual) physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Rafferty, Moira, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 04 / 2024
Mailing Address 3214 Landon Street			<b>Transaction ID : SA11AI.44069</b>
City Lynchburg	State VA	Zip Code 24503	Amount of Each Receipt this Period 180.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Medical Associates of Central Virginia		Occupation (for Individual) physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 780.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	680.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Rafferty, Moira, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3214 Landon Street  
 City Lynchburg State VA Zip Code 24503  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Medical Associates of Central Virginia Occupation (for Individual) physician  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1030.00

Date of Receipt  
 11 / 05 / 2024  
**Transaction ID : SA11AI.44070**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Rafferty, Moira, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3214 Landon Street  
 City Lynchburg State VA Zip Code 24503  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Medical Associates of Central Virginia Occupation (for Individual) physician  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1280.00

Date of Receipt  
 11 / 14 / 2024  
**Transaction ID : SA11AI.44071**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Reinhardt, William, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1613 New Scotland Road  
 City Slingerlands State NY Zip Code 12159  
 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 ▼ 300.00

Date of Receipt  
 11 / 09 / 2024  
**Transaction ID : SA11AI.44106**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	600.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Reisel, Karl, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1563 Riverdale Dr.  
 City Oconomowoc State WI Zip Code 53066  
 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 ▼ 1300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 20 / 2024  
**Transaction ID : SA11AI.44108**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**B. Reisel, Karl, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1563 Riverdale Dr.  
 City Oconomowoc State WI Zip Code 53066  
 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 ▼ 1400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 24 / 2024  
**Transaction ID : SA11AI.44109**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**C. Reiser, Amy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 36 Fairview Ave  
 City Northampton State MA Zip Code 01060  
 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 ▼ 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 19 / 2024  
**Transaction ID : SA11AI.44110**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 301
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Reiser, Amy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 36 Fairview Ave  
 City Northampton State MA Zip Code 01060  
 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 ▼ 370.00

Date of Receipt 10 / 31 / 2024  
**Transaction ID : SA11AI.44111**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Reiser, Amy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 36 Fairview Ave  
 City Northampton State MA Zip Code 01060  
 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 ▼ 415.00

Date of Receipt 11 / 02 / 2024  
**Transaction ID : SA11AI.44112**  
 Amount of Each Receipt this Period 45.00  
 Memo Item

**C. Ribe, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 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) CAN Softech Occupation (for Individual) Data Analyst  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 09 / 2024  
**Transaction ID : SA11AI.44121**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	345.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Rideout, Ransom, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 22 / 2024 <b>Transaction ID : SA11AI.44123</b>		
Mailing Address 205 E. Loma Alta Dr.			Amount of Each Receipt this Period 25.00		
City Altadena	State CA	Zip Code 91001	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) CSUN College of Science and Mathemati		Occupation (for Individual) Engineer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Rideout, Ransom, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 09 / 2024 <b>Transaction ID : SA11AI.44124</b>		
Mailing Address 205 E. Loma Alta Dr.			Amount of Each Receipt this Period 20.00		
City Altadena	State CA	Zip Code 91001	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) CSUN College of Science and Mathemati		Occupation (for Individual) Engineer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Rideout, Ransom, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 10 / 2024 <b>Transaction ID : SA11AI.44125</b>		
Mailing Address 205 E. Loma Alta Dr.			Amount of Each Receipt this Period 25.00		
City Altadena	State CA	Zip Code 91001	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) CSUN College of Science and Mathemati		Occupation (for Individual) Engineer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 275.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	70.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Riecker, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. Box 983  
 City Salado State TX Zip Code 76571  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) self Occupation (for Individual) futures trader  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 392.00

Date of Receipt 10 / 17 / 2024  
**Transaction ID : SA11AI.44126**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**B. Riecker, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. Box 983  
 City Salado State TX Zip Code 76571  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) self Occupation (for Individual) futures trader  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 422.00

Date of Receipt 11 / 17 / 2024  
**Transaction ID : SA11AI.44127**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**C. Riekse, Meredith, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 235 Berry St Apt 113  
 City San Francisco State CA Zip Code 94158  
 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 ▼ 300.00

Date of Receipt 10 / 19 / 2024  
**Transaction ID : SA11AI.44128**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	160.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Riekse, Meredith, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 235 Berry St Apt 113  
 City San Francisco State CA Zip Code 94158  
 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 ▼ 350.00

Date of Receipt 11 / 04 / 2024  
**Transaction ID : SA11AI.44129**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Ritenbaugh, Cheryl, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4917 Oliver Ave S  
 City Minneapolis State MN Zip Code 55419-5256  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 23 / 2024  
**Transaction ID : SA11AI.44133**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Robin, Carol, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 269 John Joy Rd.  
 City Woodstock State NY Zip Code 12498  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) self Occupation (for Individual) chiropractor  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 10 / 20 / 2024  
**Transaction ID : SA11AI.44138**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	175.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 301
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Robin, Carol, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 269 John Joy Rd.  
 City Woodstock State NY Zip Code 12498  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) self Occupation (for Individual) chiropractor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 10 / 22 / 2024  
**Transaction ID : SA11AI.44139**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Robin, Carol, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 269 John Joy Rd.  
 City Woodstock State NY Zip Code 12498  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) self Occupation (for Individual) chiropractor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 407.00

Date of Receipt 11 / 09 / 2024  
**Transaction ID : SA11AI.44140**  
 Amount of Each Receipt this Period 17.00  
 Memo Item

**C. Roth, David R, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3936 SE Ankeny St  
 City portland State OR Zip Code 97214  
 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 ▼ 800.00

Date of Receipt 11 / 14 / 2024  
**Transaction ID : SA11AI.44183**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	117.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 96 OF 301
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Roth, David R, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 16 / 2024 <b>Transaction ID : SA11AI.44184</b>
Mailing Address 3936 SE Ankeny St		Amount of Each Receipt this Period 25.00
City portland	State OR	Zip Code 97214
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 825.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Rothbarth, Jean, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 04 / 2024 <b>Transaction ID : SA11AI.44186</b>
Mailing Address 1201 S.Prairie Ave. #1403		Amount of Each Receipt this Period 250.00
City Chicago	State IL	Zip Code 60605
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Ruscetta, Aaron, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 29 / 2024 <b>Transaction ID : SA11AI.44206</b>
Mailing Address 601 Webster Drive		Amount of Each Receipt this Period 50.00
City Decatur	State GA	Zip Code 30033-5434
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) self	Occupation (for Individual) Video and Digital Media Production	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 220.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	325.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 97 OF 301
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
russak, fern, , ,

Mailing Address 938 ne hazelfern pl

City portland	State OR	Zip Code 97232
------------------	-------------	-------------------

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

Name of Employer (for Individual) nw permanente	Occupation (for Individual) pediatrician
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 03 / 2024

**Transaction ID : SA11AI.44208**

Amount of Each Receipt this Period  
100.00

Memo Item

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

Mailing Address 938 ne hazelfern pl

City portland	State OR	Zip Code 97232
------------------	-------------	-------------------

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

Name of Employer (for Individual) nw permanente	Occupation (for Individual) pediatrician
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
330.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 04 / 2024

**Transaction ID : SA11AI.44209**

Amount of Each Receipt this Period  
50.00

Memo Item

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

Mailing Address 938 ne hazelfern pl

City portland	State OR	Zip Code 97232
------------------	-------------	-------------------

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

Name of Employer (for Individual) nw permanente	Occupation (for Individual) pediatrician
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 05 / 2024

**Transaction ID : SA11AI.44210**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	200.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A.** russak, fern, , ,

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

Mailing Address 938 ne hazelfern pl

City portland	State OR	Zip Code 97232
------------------	-------------	-------------------

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

Name of Employer (for Individual) nw permanente	Occupation (for Individual) pediatrician
--	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
430.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 05 / 2024

**Transaction ID : SA11AI.44211**

Amount of Each Receipt this Period  
50.00

Memo Item

**B.** russak, fern, , ,

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

Mailing Address 938 ne hazelfern pl

City portland	State OR	Zip Code 97232
------------------	-------------	-------------------

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

Name of Employer (for Individual) nw permanente	Occupation (for Individual) pediatrician
--	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
480.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 05 / 2024

**Transaction ID : SA11AI.44212**

Amount of Each Receipt this Period  
50.00

Memo Item

**C.** russak, fern, , ,

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

Mailing Address 938 ne hazelfern pl

City portland	State OR	Zip Code 97232
------------------	-------------	-------------------

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

Name of Employer (for Individual) nw permanente	Occupation (for Individual) pediatrician
--	---

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
530.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 10 / 2024

**Transaction ID : SA11AI.44213**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	150.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Safier, Renee, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 516 N. Francisco Ave.  
 City unit C    State CA    Zip Code 90277  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) self    Occupation (for Individual) musician  
 Receipt For:  Primary     General     Other (specify) ▼  
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 11 / 02 / 2024  
**Transaction ID : SA11AI.44228**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Safier, Renee, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 516 N. Francisco Ave.  
 City unit C    State CA    Zip Code 90277  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) self    Occupation (for Individual) musician  
 Receipt For:  Primary     General     Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 13 / 2024  
**Transaction ID : SA11AI.44229**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Sasso, Scott, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 358 12th Street #1L  
 City Brooklyn    State NY    Zip Code 11215  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Therapists of NY    Occupation (for Individual) Psychologist  
 Receipt For:  Primary     General     Other (specify)  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 14 / 2024  
**Transaction ID : SA11AI.44244**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	75.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Saval, Maureen, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 19 / 2024 <b>Transaction ID : SA11AI.44253</b>
Mailing Address 3603 Lajitas		Amount of Each Receipt this Period 50.00
City Leander	State TX	Zip Code 78641-3654
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) retired	Occupation (for Individual) retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Schaffer, Ariane, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 02 / 2024 <b>Transaction ID : SA11AI.44254</b>
Mailing Address 741 West End Ave 4A		Amount of Each Receipt this Period 25.00
City New York	State NY	Zip Code 10025
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Google	Occupation (for Individual) Policy	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Schroeder, Cynthia, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 19 / 2024 <b>Transaction ID : SA11AI.44275</b>
Mailing Address 1844 E 11th Ave.		Amount of Each Receipt this Period 25.00
City Spokane	State WA	Zip Code 99202
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Schroeder, Cynthia, , ,**

Mailing Address 1844 E 11th Ave.

City Spokane	State WA	Zip Code 99202
-----------------	-------------	-------------------

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 ▼  
275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 19 / 2024  
**Transaction ID : SA11AI.44276**

Amount of Each Receipt this Period  
25.00

Memo Item

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

Mailing Address 6204 Loukelton Cir

City San Diego	State CA	Zip Code 92120
-------------------	-------------	-------------------

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

Name of Employer (for Individual) Scripps health	Occupation (for Individual) Perinatal educator
---	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 05 / 2024  
**Transaction ID : SA11AI.44288**

Amount of Each Receipt this Period  
100.00

Memo Item

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

Mailing Address 6 William Road

City South Berwick	State ME	Zip Code 03908
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed
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Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 01 / 2024  
**Transaction ID : SA11AI.44307**

Amount of Each Receipt this Period  
140.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	265.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Share, Robin, , ,</b>		Date of Receipt MM / DD / YYYY 11 / 03 / 2024 <b>Transaction ID : SA11AI.44326</b>
Mailing Address 4414 Kester Ave.		Amount of Each Receipt this Period 100.00
City Sherman Oaks	State CA	Zip Code 91403
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Share, Robin, , ,</b>		Date of Receipt MM / DD / YYYY 11 / 05 / 2024 <b>Transaction ID : SA11AI.44327</b>
Mailing Address 4414 Kester Ave.		Amount of Each Receipt this Period 100.00
City Sherman Oaks	State CA	Zip Code 91403
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Silver, Patricia, , ,</b>		Date of Receipt MM / DD / YYYY 10 / 19 / 2024 <b>Transaction ID : SA11AI.44367</b>
Mailing Address 901 Arlington Ave		Amount of Each Receipt this Period 100.00
City Berkeley	State CA	Zip Code 94707
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Z Space	Occupation (for Individual) actor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 790.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Silver, Patricia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 901 Arlington Ave  
 City Berkeley State CA Zip Code 94707  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Z Space Occupation (for Individual) actor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 890.00

Date of Receipt 11 / 04 / 2024  
**Transaction ID : SA11AI.44368**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. Slotnick, Jon, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4267 Le Bourget Ave.  
 City Culver City State CA Zip Code 90232  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 24 / 2024  
**Transaction ID : SA11AI.44399**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Smith, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 33 Sovereign Way  
 City Fort Pierce State FL Zip Code 34949  
 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 11 / 14 / 2024  
**Transaction ID : SA11AI.44404**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	700.00
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Smith, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 33 Sovereign Way  
 City Fort Pierce State FL Zip Code 34949  
 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 ▼ 310.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 21 / 2024  
**Transaction ID : SA11AI.44405**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**B. Solez, Elaine, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8711 Saskatchewan Drive  
 City Edmonton State ZZ Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 22 / 2024  
**Transaction ID : SA11AI.44438**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**C. Solez, Elaine, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8711 Saskatchewan Drive  
 City Edmonton State ZZ Zip Code  
 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 ▼ 275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 22 / 2024  
**Transaction ID : SA11AI.44439**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	150.00
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 301
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Sorensen, Robert, , ,**

Mailing Address 233 Brewery Rd

City New City	State NY	Zip Code 10956
------------------	-------------	-------------------

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 ▼  
203.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2024

**Transaction ID : SA11AI.44447**

Amount of Each Receipt this Period  
55.00

Memo Item

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

Mailing Address 53 Stone Road

City Sudbury	State MA	Zip Code 01776
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Town of Sudbury	Occupation (for Individual) library asst.
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2024

**Transaction ID : SA11AI.44491**

Amount of Each Receipt this Period  
50.00

Memo Item

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

Mailing Address 53 Stone Road

City Sudbury	State MA	Zip Code 01776
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Town of Sudbury	Occupation (for Individual) library asst.
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2024

**Transaction ID : SA11AI.44492**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	155.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 301
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. stine, sue, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 53 Stone Road  
 City Sudbury State MA Zip Code 01776  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Town of Sudbury Occupation (for Individual) library asst.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 11 / 19 / 2024  
**Transaction ID : SA11AI.44493**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Strid, Eric, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 545 Sw Waubish St  
 City White Salmon State WA Zip Code 98672  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 10 / 2024  
**Transaction ID : SA11AI.44499**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. Strid, Eric, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 545 Sw Waubish St  
 City White Salmon State WA Zip Code 98672  
 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 ▼ 525.00

Date of Receipt 11 / 13 / 2024  
**Transaction ID : SA11AI.44500**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	150.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 107 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Strid, Eric, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 545 Sw Waubish St  
 City White Salmon State WA Zip Code 98672  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 11 / 20 / 2024  
**Transaction ID : SA11AI.44501**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. Stroughair, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 124 N Prince St  
 City Shippensburg State PA Zip Code 17257  
 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 ▼ 270.00

Date of Receipt 11 / 03 / 2024  
**Transaction ID : SA11AI.44502**  
 Amount of Each Receipt this Period 180.00  
 Memo Item

**C. Tatlock, Betsy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 37801 N Cave Creek Rd #37  
 City Cave Creek State AZ Zip Code 85331  
 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 ▼ 218.00

Date of Receipt 11 / 03 / 2024  
**Transaction ID : SA11AI.44554**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 108 OF 301
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Thomas, Vonne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 518  
 City Garberville State CA Zip Code 95542  
 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 ▼ 440.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 01 / 2024  
**Transaction ID : SA11AI.44589**  
 Amount of Each Receipt this Period  
 40.00  
 Memo Item

**B. Tyler, Bridget, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5920 Sw Quietcreek Dr  
 City Corvallis State OR Zip Code 97333  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Writer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 04 / 2024  
**Transaction ID : SA11AI.44633**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**C. Ulrich, Joyce, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 20640 Audette Street  
 City Dearborn State MI Zip Code 48124  
 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 M / D D D / Y Y Y Y Y Y  
 11 / 10 / 2024  
**Transaction ID : SA11AI.44638**  
 Amount of Each Receipt this Period  
 45.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	135.00
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Ulrich, Joyce, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 20640 Audette Street  
 City Dearborn State MI Zip Code 48124  
 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 ▼ 265.00

Date of Receipt 11 / 15 / 2024  
**Transaction ID : SA11AI.44639**  
 Amount of Each Receipt this Period 45.00  
 Memo Item

**B. Ulrich, Joyce, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 20640 Audette Street  
 City Dearborn State MI Zip Code 48124  
 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 ▼ 310.00

Date of Receipt 11 / 17 / 2024  
**Transaction ID : SA11AI.44640**  
 Amount of Each Receipt this Period 45.00  
 Memo Item

**C. Voorhees, Scott, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Upton Grey Place Upton Grey  
 City Basingstoke State ZZ Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Industrial Designer Occupation (for Individual) Stored Solar  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 03 / 2024  
**Transaction ID : SA11AI.44709**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	340.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 110 OF 301
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Voorhees, Scott, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address Upton Grey Place Upton Grey  
 City Basingstoke State ZZ Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Industrial Designer Occupation (for Individual) Stored Solar  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 04 / 2024  
**Transaction ID : SA11AI.44710**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Wappler, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6250 Telegraph Road Apt 1210  
 City Ventura State CA Zip Code 93003  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) self Occupation (for Individual) Wildlife Biologist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 20 / 2024  
**Transaction ID : SA11AI.44747**  
 Amount of Each Receipt this Period  
 75.00  
 Memo Item

**C. Weaver, Douglas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4471 Dogwood Ct  
 City North Canton State OH Zip Code 44720  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Goodyear Tire Occupation (for Individual) Engineer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 22 / 2024  
**Transaction ID : SA11AI.44770**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	425.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 111 OF 301
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Weaver, Douglas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4471 Dogwood Ct  
 City North Canton State OH Zip Code 44720  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Goodyear Tire Occupation (for Individual) Engineer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 10 / 25 / 2024  
**Transaction ID : SA11AI.44771**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. Weaver, Douglas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4471 Dogwood Ct  
 City North Canton State OH Zip Code 44720  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Goodyear Tire Occupation (for Individual) Engineer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt 10 / 26 / 2024  
**Transaction ID : SA11AI.44772**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. Weaver, Douglas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4471 Dogwood Ct  
 City North Canton State OH Zip Code 44720  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Goodyear Tire Occupation (for Individual) Engineer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 29 / 2024  
**Transaction ID : SA11AI.44773**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 225.00  
**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: (check only one)	PAGE 112 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Weaver, Douglas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4471 Dogwood Ct  
 City North Canton State OH Zip Code 44720  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Goodyear Tire Occupation (for Individual) Engineer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 825.00

Date of Receipt 11 / 03 / 2024  
**Transaction ID : SA11AI.44774**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Weaver, Douglas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4471 Dogwood Ct  
 City North Canton State OH Zip Code 44720  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Goodyear Tire Occupation (for Individual) Engineer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 925.00

Date of Receipt 11 / 10 / 2024  
**Transaction ID : SA11AI.44775**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. Weaver, Douglas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4471 Dogwood Ct  
 City North Canton State OH Zip Code 44720  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Goodyear Tire Occupation (for Individual) Engineer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 11 / 10 / 2024  
**Transaction ID : SA11AI.44776**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	150.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 113 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Weaver, Douglas, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 18 / 2024 <b>Transaction ID : SA11AI.44777</b>		
Mailing Address 4471 Dogwood Ct			Amount of Each Receipt this Period 25.00		
City North Canton	State OH	Zip Code 44720	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) Goodyear Tire		Occupation (for Individual) Engineer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 975.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Weaver, Douglas, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 18 / 2024 <b>Transaction ID : SA11AI.44778</b>		
Mailing Address 4471 Dogwood Ct			Amount of Each Receipt this Period 25.00		
City North Canton	State OH	Zip Code 44720	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) Goodyear Tire		Occupation (for Individual) Engineer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Weaver, Douglas, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 20 / 2024 <b>Transaction ID : SA11AI.44779</b>		
Mailing Address 4471 Dogwood Ct			Amount of Each Receipt this Period 25.00		
City North Canton	State OH	Zip Code 44720	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) Goodyear Tire		Occupation (for Individual) Engineer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 1025.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	75.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Weil, Jesse, , ,

Mailing Address 3451 Redcoach Trail

City Lexixngton	State KY	Zip Code 40517
--------------------	-------------	-------------------

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 ▼  
333.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 20 / 2024

**Transaction ID : SA11AI.44788**

Amount of Each Receipt this Period  
108.00

Memo Item

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

Mailing Address 3451 Redcoach Trail

City Lexixngton	State KY	Zip Code 40517
--------------------	-------------	-------------------

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 ▼  
358.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 26 / 2024

**Transaction ID : SA11AI.44789**

Amount of Each Receipt this Period  
25.00

Memo Item

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

Mailing Address 3451 Redcoach Trail

City Lexixngton	State KY	Zip Code 40517
--------------------	-------------	-------------------

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 ▼  
408.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 27 / 2024

**Transaction ID : SA11AI.44790**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	183.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 115 OF 301
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Weil, Jesse, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3451 Redcoach Trail  
 City Lexington State KY Zip Code 40517  
 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 ▼ 516.00

Date of Receipt 10 / 27 / 2024  
**Transaction ID : SA11AI.44791**  
 Amount of Each Receipt this Period 108.00  
 Memo Item

**B. Weil, Jesse L, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3451 Redcoach Trail  
 City Lexington State KY Zip Code 40517  
 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 ▼ 275.00

Date of Receipt 11 / 07 / 2024  
**Transaction ID : SA11AI.44792**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Weiner, Justin, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 409 S Bruner St  
 City Hinsdale State IL Zip Code 60521  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Northwestern Occupation (for Individual) physician  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 10 / 20 / 2024  
**Transaction ID : SA11AI.44793**  
 Amount of Each Receipt this Period 60.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	193.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 116 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Weiner, Justin, , ,**

Mailing Address 409 S Bruner St

City Hinsdale	State IL	Zip Code 60521
------------------	-------------	-------------------

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

Name of Employer (for Individual) Northwestern	Occupation (for Individual) physician
---	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
370.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 03 / 2024  
**Transaction ID : SA11AI.44794**

Amount of Each Receipt this Period  
50.00

Memo Item

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

Mailing Address 861 E. Bennett Ave.

City Glendora	State CA	Zip Code 91741
------------------	-------------	-------------------

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

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed
---	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 30 / 2024  
**Transaction ID : SA11AI.44828**

Amount of Each Receipt this Period  
25.00

Memo Item

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

Mailing Address 5780 Waterbury Way #L

City Salt Lake City	State UT	Zip Code 84121-1142
------------------------	-------------	------------------------

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

Name of Employer (for Individual) self	Occupation (for Individual) psychiatrist
---	---

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 05 / 2024  
**Transaction ID : SA11AI.44841**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	325.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 117 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Wolanin, Peter, , ,

Mailing Address 2144 Green St

City Philadelphia	State PA	Zip Code 19130
----------------------	-------------	-------------------

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

Name of Employer (for Individual) Research Applications & Financial Trac	Occupation (for Individual) software engineer
---	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 12 / 2024  
**Transaction ID : SA11AI.44864**

Amount of Each Receipt this Period  
50.00

Memo Item

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

Mailing Address 2144 Green St

City Philadelphia	State PA	Zip Code 19130
----------------------	-------------	-------------------

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

Name of Employer (for Individual) Research Applications & Financial Trac	Occupation (for Individual) software engineer
---	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 14 / 2024  
**Transaction ID : SA11AI.44865**

Amount of Each Receipt this Period  
50.00

Memo Item

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

Mailing Address 2144 Green St

City Philadelphia	State PA	Zip Code 19130
----------------------	-------------	-------------------

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

Name of Employer (for Individual) Research Applications & Financial Trac	Occupation (for Individual) software engineer
---	--

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 17 / 2024  
**Transaction ID : SA11AI.44866**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	150.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 118 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Wright, Carolyn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3002 Mill Creek Rd.  
 City The Dalles    State OR    Zip Code 97058  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) None    Occupation (for Individual) Retired  
 Receipt For:  Primary     General     Other (specify) ▼  
 Aggregate Year-to-Date ▼ 212.00

Date of Receipt **11 / 20 / 2024**  
**Transaction ID : SA11AI.44881**  
 Amount of Each Receipt this Period 17.00  
 Memo Item

**B. Wright, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1025 Stoney Creek Lane  
 City Mt Pleasant    State MI    Zip Code 48858  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired    Occupation (for Individual) Retired  
 Receipt For:  Primary     General     Other (specify) ▼  
 Aggregate Year-to-Date ▼ 536.00

Date of Receipt **10 / 19 / 2024**  
**Transaction ID : SA11AI.44884**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. Wright, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1025 Stoney Creek Lane  
 City Mt Pleasant    State MI    Zip Code 48858  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired    Occupation (for Individual) Retired  
 Receipt For:  Primary     General     Other (specify)  
 Aggregate Year-to-Date ▼ 586.00

Date of Receipt **10 / 26 / 2024**  
**Transaction ID : SA11AI.44885**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	167.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 119 OF 301
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Yoshino, Anne, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 03 / 2024 <b>Transaction ID : SA11AI.44899</b>		
Mailing Address 6091 N CAMINO DE MICHAEL			Amount of Each Receipt this Period 30.00		
City TUCSON	State AZ	Zip Code 85718	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) Not Employed		Occupation (for Individual) Not Employed			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 209.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Yoshino, Anne, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 14 / 2024 <b>Transaction ID : SA11AI.44900</b>		
Mailing Address 6091 N CAMINO DE MICHAEL			Amount of Each Receipt this Period 50.00		
City TUCSON	State AZ	Zip Code 85718	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) Not Employed		Occupation (for Individual) Not Employed			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 259.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Yoshino, Anne, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 21 / 2024 <b>Transaction ID : SA11AI.44901</b>		
Mailing Address 6091 N CAMINO DE MICHAEL			Amount of Each Receipt this Period 50.00		
City TUCSON	State AZ	Zip Code 85718	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) Not Employed		Occupation (for Individual) Not Employed			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 309.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	130.00
<b>TOTAL</b> This Period (last page this line number only).....▶	46492.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 120 OF 301
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. TOGETHER WE ELECT PAC**

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

Mailing Address 5 CASTLE ROAD

City LEXINGTON	State MA	Zip Code 02420
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00812479

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: **10 / 18 / 2024**

**Transaction ID : SA11C.45136**

Amount of Each Receipt this Period: 5000.00

Memo Item

**B.**

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

**C.**

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5000.00
<b>TOTAL</b> This Period (last page this line number only).....	5000.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 121 OF 301
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Alsop, Joseph, , ,**

Mailing Address 675 C Hale St

City Beverly	State MA	Zip Code 01915
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Alsop Louie Partners	Occupation (for Individual) Venture Capital
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 30 / 2024

**Transaction ID : SA17.41908**

Amount of Each Receipt this Period  
10000.00

Memo Item  
Contribution - IE Only Account

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

Mailing Address 1068 N Eagle Hollow Rd

City Green Valley	State AZ	Zip Code 85614-6086
----------------------	-------------	------------------------

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 ▼  
5250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 03 / 2024

**Transaction ID : SA17.46348**

Amount of Each Receipt this Period  
250.00

Memo Item  
Contribution - IE Only Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. GRASSROOTS DEMOCRATS HQ**

Mailing Address 249 E OCEAN BL #685

City LONG BEACH	State CA	Zip Code 90802
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C C00707091**

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
133000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 14 / 2024

**Transaction ID : SA17.41910**

Amount of Each Receipt this Period  
25000.00

Memo Item  
Contribution - IE Only Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	35250.00
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 122 OF 301
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Harris, William H., , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1010 Waltham St  
 City Lexington State MA Zip Code 02421  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 30000.00

Date of Receipt 10 / 29 / 2024  
**Transaction ID : SA17.41906**  
 Amount of Each Receipt this Period 30000.00  
 Memo Item  
 Contribution - IE Only Account

**B. Smudz, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4655 Haymarket  
 City Columbus State OH Zip Code 43220  
 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 ▼ 5865.00

Date of Receipt 10 / 19 / 2024  
**Transaction ID : SA17.46355**  
 Amount of Each Receipt this Period 170.00  
 Memo Item  
 Contribution - IE Only Account

**C. Smudz, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4655 Haymarket  
 City Columbus State OH Zip Code 43220  
 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 ▼ 6035.00

Date of Receipt 10 / 25 / 2024  
**Transaction ID : SA17.46357**  
 Amount of Each Receipt this Period 170.00  
 Memo Item  
 Contribution - IE Only Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	30340.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 123 OF 301
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Smudz, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4655 Haymarket  
 City Columbus State OH Zip Code 43220  
 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 ▼ 6215.00

Date of Receipt 11 / 02 / 2024  
**Transaction ID : SA17.46359**  
 Amount of Each Receipt this Period 180.00  
 Memo Item  
 Contribution - IE Only Account

**B. Smudz, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4655 Haymarket  
 City Columbus State OH Zip Code 43220  
 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 ▼ 6315.00

Date of Receipt 11 / 04 / 2024  
**Transaction ID : SA17.46361**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Contribution - IE Only Account

**C. Smudz, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4655 Haymarket  
 City Columbus State OH Zip Code 43220  
 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 ▼ 6415.00

Date of Receipt 11 / 05 / 2024  
**Transaction ID : SA17.46363**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Contribution - IE Only Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	380.00
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 124 OF 301
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Smudz, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4655 Haymarket  
 City Columbus State OH Zip Code 43220  
 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 ▼ 6500.00

Date of Receipt 11 / 12 / 2024  
**Transaction ID : SA17.46365**  
 Amount of Each Receipt this Period 85.00  
 Memo Item  
 Contribution - IE Only Account

**B. Smudz, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4655 Haymarket  
 City Columbus State OH Zip Code 43220  
 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 ▼ 6800.00

Date of Receipt 11 / 16 / 2024  
**Transaction ID : SA17.46367**  
 Amount of Each Receipt this Period 300.00  
 Memo Item  
 Contribution - IE Only Account

**C. Smudz, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4655 Haymarket  
 City Columbus State OH Zip Code 43220  
 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 ▼ 6900.00

Date of Receipt 11 / 17 / 2024  
**Transaction ID : SA17.46369**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Contribution - IE Only Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	485.00
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 125 OF 301
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Smudz, Susan, , ,**

Mailing Address **4655 Haymarket**

City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43220</b>
-------------------------	--------------------	--------------------------

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

Name of Employer (for Individual) <b>Not Employed</b>	Occupation (for Individual) <b>Not Employed</b>
--	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**7000.00**

Date of Receipt  
**11 / 18 / 2024**

**Transaction ID : SA17.46371**

Amount of Each Receipt this Period  
**100.00**

Memo Item  
Contribution - IE Only Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. VOTE SAVE AMERICA**

Mailing Address **611 PENNSYLVANIA AVE SE  
NUM 143**

City <b>WASHINGTON</b>	State <b>DC</b>	Zip Code <b>20003</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C C00835587**

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**6000.00**

Date of Receipt  
**10 / 18 / 2024**

**Transaction ID : SA17.41904**

Amount of Each Receipt this Period  
**6000.00**

Memo Item  
Contribution - IE Only 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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>6100.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>72555.00</b>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

## YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address PO Box 441146

City  
Somerville

State  
MA

Zip Code  
02144

Purpose of Disbursement

Credit Card Processing Fees

Candidate Name

Office Sought:

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

Disbursement For:

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	5		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.44921

Amount of Each Disbursement this Period

[REDACTED] 5115.27

Memo Item

Full Name (Last, First, Middle Initial)

**B. Action Squared LLC**

Mailing Address 1900 L Street, NW  
Suite 900

City  
Washington

State  
DC

Zip Code  
20036

Purpose of Disbursement

Database Management

Candidate Name

Office Sought:

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

Disbursement For:

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	5		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.45186

Amount of Each Disbursement this Period

[REDACTED] 10.60

Memo Item

Full Name (Last, First, Middle Initial)

**C. Action Squared LLC**

Mailing Address 1900 L Street, NW  
Suite 900

City  
Washington

State  
DC

Zip Code  
20036

Purpose of Disbursement

Database Management

Candidate Name

Office Sought:

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

Disbursement For:

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	3		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.45795

Amount of Each Disbursement this Period

[REDACTED] 2224.73

Memo Item

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

[REDACTED] 7350.60

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

[REDACTED]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Action Squared LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 1900 L Street, NW  
Suite 900

City Washington State DC Zip Code 20036

Purpose of Disbursement Database Management

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
11 / 25 / 2024

FEC Identification Number: C

Transaction ID : SB21B.45818

Amount of Each Disbursement this Period: 46.32

Memo Item

**B. Adams, Sivan M., , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 415 South Street  
MB 1492

City Waltham State MA Zip Code 02453

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
10 / 29 / 2024

FEC Identification Number: C

Transaction ID : SB21B.45204

Amount of Each Disbursement this Period: 150.00

Memo Item

**C. Adams, Sivan M., , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 415 South Street  
MB 1492

City Waltham State MA Zip Code 02453

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
11 / 15 / 2024

FEC Identification Number: C

Transaction ID : SB21B.45205

Amount of Each Disbursement this Period: 225.00

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	421.32
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Adekoya, Olamide A., , ,**

Mailing Address 2268 Spruce Street

City  
Ewing

State  
NJ

Zip Code  
08638

Purpose of Disbursement

Strategic Consulting

Candidate Name

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			29			2024			

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB21B.45206**

Amount of Each Disbursement this Period

[Redacted]	150.00
------------	--------

Memo Item

Full Name (Last, First, Middle Initial)

**B. Adekoya, Olamide A., , ,**

Mailing Address 2268 Spruce Street

City  
Ewing

State  
NJ

Zip Code  
08638

Purpose of Disbursement

Strategic Consulting

Candidate Name

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2024			

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB21B.45207**

Amount of Each Disbursement this Period

[Redacted]	225.00
------------	--------

Memo Item

Full Name (Last, First, Middle Initial)

**C. Agahi, Rana, , ,**

Mailing Address 57 Ciproso

City  
Irvine

State  
CA

Zip Code  
92618

Purpose of Disbursement

Strategic Consulting

Candidate Name

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			19			2024			

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB21B.45765**

Amount of Each Disbursement this Period

[Redacted]	600.00
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Memo Item

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

[Redacted]	975.00
------------	--------

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

[Redacted]	
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Aggarwal, amiya, , ,**

Mailing Address 12525 E Altadena Ave.

City  
Scottsdale

State  
AZ

Zip Code  
85259

Purpose of Disbursement

Strategic Consulting

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
10			29			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45208**

Amount of Each Disbursement this Period

150.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Aggarwal, amiya, , ,**

Mailing Address 12525 E Altadena Ave.

City  
Scottsdale

State  
AZ

Zip Code  
85259

Purpose of Disbursement

Strategic Consulting

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
11			15			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45209**

Amount of Each Disbursement this Period

225.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Ahmed, Amina, , ,**

Mailing Address 9450 Gilman Dr.  
#45730

City  
La Jolla

State  
CA

Zip Code  
92092

Purpose of Disbursement

Strategic Consulting

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
10			29			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45211**

Amount of Each Disbursement this Period

150.00

Memo Item

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

525.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Ahmed, Amina, , ,**

Mailing Address 9450 Gilman Dr.  
#45730

City  
La Jolla

State  
CA

Zip Code  
92092

Purpose of Disbursement  
Strategic Consulting

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2024			

FEC Identification Number

C [ ]

**Transaction ID : SB21B.45211**

Amount of Each Disbursement this Period

[ ] 225.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Akuamoah-Boateng, Bri, , ,**

Mailing Address 20449 Watkins Meadow Dr.

City  
Germantown

State  
MD

Zip Code  
20876

Purpose of Disbursement  
Strategic Consulting

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			29			2024			

FEC Identification Number

C [ ]

**Transaction ID : SB21B.45212**

Amount of Each Disbursement this Period

[ ] 150.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Akuamoah-Boateng, Bri, , ,**

Mailing Address 20449 Watkins Meadow Dr.

City  
Germantown

State  
MD

Zip Code  
20876

Purpose of Disbursement  
Strategic Consulting

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2024			

FEC Identification Number

C [ ]

**Transaction ID : SB21B.45213**

Amount of Each Disbursement this Period

[ ] 225.00

Memo Item

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

[ ] 600.00

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

[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Alava, Anna, , ,**

Mailing Address 125 Big Oak Rd.

City  
Yardley

State  
PA

Zip Code  
19067

Purpose of Disbursement

Strategic Consulting

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
10			29			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45214**

Amount of Each Disbursement this Period

75.00
-------

Memo Item

Full Name (Last, First, Middle Initial)

**B. Alava, Anna, , ,**

Mailing Address 125 Big Oak Rd.

City  
Yardley

State  
PA

Zip Code  
19067

Purpose of Disbursement

Strategic Consulting

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
11			15			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45215**

Amount of Each Disbursement this Period

150.00
--------

Memo Item

Full Name (Last, First, Middle Initial)

**C. Alvarez, Tessa S., , ,**

Mailing Address 1233 N. Orange Grove  
Apt. 7

City  
West Hollywood

State  
CA

Zip Code  
90046

Purpose of Disbursement

Strategic Consulting

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
10			29			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45216**

Amount of Each Disbursement this Period

155.00
--------

Memo Item

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

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

380.00
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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

Form for line numbers 21b-30b with checkboxes. 21b is checked.

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...

NAME OF COMMITTEE (In Full)

YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial)

A. Alvarez, Tessa S., , ,

Date of Disbursement

Date selection box: 11 / 15 / 2024

Mailing Address 1233 N. Orange Grove Apt. 7

City West Hollywood State CA Zip Code 90046

Purpose of Disbursement Strategic Consulting

FEC Identification Number

FEC ID box: C

Transaction ID : SB21B.45217

Amount of Each Disbursement this Period

Amount box: 225.00

Candidate Name

Category/Type box

Office Sought: House, Senate, President

Disbursement For: Primary, General, Other (specify)

Memo Item checkbox

State: District:

Full Name (Last, First, Middle Initial)

B. Amalgamated Bank

Date of Disbursement

Date selection box: 10 / 29 / 2024

Mailing Address 1825 K Street, N.W

City Washington State DC Zip Code 20006

Purpose of Disbursement Bank Charges

FEC Identification Number

FEC ID box: C

Transaction ID : SB21B.45487

Amount of Each Disbursement this Period

Amount box: 32.63

Candidate Name

Category/Type box

Office Sought: House, Senate, President

Disbursement For: Primary, General, Other (specify)

Memo Item checkbox

State: District:

Full Name (Last, First, Middle Initial)

C. Ambre, Esha, , ,

Date of Disbursement

Date selection box: 10 / 29 / 2024

Mailing Address 4297 Chetwood Ave

City Fremont State CA Zip Code 94538

Purpose of Disbursement Strategic Consulting

FEC Identification Number

FEC ID box: C

Transaction ID : SB21B.45218

Amount of Each Disbursement this Period

Amount box: 75.00

Candidate Name

Category/Type box

Office Sought: House, Senate, President

Disbursement For: Primary, General, Other (specify)

Memo Item checkbox

State: District:

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

Subtotal box: 332.63

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

Total box

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Ambre, Esha, , ,**

Mailing Address 4297 Chetwood Ave

City  
Fremont

State  
CA

Zip Code  
94538

Purpose of Disbursement

Strategic Consulting

Candidate Name

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45219**

Amount of Each Disbursement this Period

75.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Avendano, Samuel S., , ,**

Mailing Address 9728 Odessa Ave.

City  
North Hills

State  
CA

Zip Code  
91343

Purpose of Disbursement

Strategic Consulting

Candidate Name

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			29			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45220**

Amount of Each Disbursement this Period

150.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Avendano, Samuel S., , ,**

Mailing Address 9728 Odessa Ave.

City  
North Hills

State  
CA

Zip Code  
91343

Purpose of Disbursement

Strategic Consulting

Candidate Name

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45221**

Amount of Each Disbursement this Period

225.00

Memo Item

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

450.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Banks, Audrey E., , ,**

Mailing Address 1959 E St. NW  
#405

City  
Washington

State  
DC

Zip Code  
20052

Purpose of Disbursement

Strategic Consulting

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
10			29			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45222**

Amount of Each Disbursement this Period

150.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Banks, Audrey E., , ,**

Mailing Address 1959 E St. NW  
#405

City  
Washington

State  
DC

Zip Code  
20052

Purpose of Disbursement

Strategic Consulting

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
11			15			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45223**

Amount of Each Disbursement this Period

225.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Barbis, Claire Elise V., , ,**

Mailing Address 2536 W Stuart Ave.

City  
Fresno

State  
CA

Zip Code  
93711

Purpose of Disbursement

Strategic Consulting

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
10			29			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45224**

Amount of Each Disbursement this Period

150.00

Memo Item

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

525.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Barbis, Claire Elise V., , ,**

Mailing Address 2536 W Stuart Ave.

City  
Fresno

State  
CA

Zip Code  
93711

Purpose of Disbursement

Strategic Consulting

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
11			15			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45225**

Amount of Each Disbursement this Period

225.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Batada, Rayan, , ,**

Mailing Address 5275 Winflow Way

City  
Suwanee

State  
GA

Zip Code  
30024

Purpose of Disbursement

Strategic Consulting

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
10			29			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45226**

Amount of Each Disbursement this Period

150.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Batada, Rayan, , ,**

Mailing Address 5275 Winflow Way

City  
Suwanee

State  
GA

Zip Code  
30024

Purpose of Disbursement

Strategic Consulting

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
11			15			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45227**

Amount of Each Disbursement this Period

225.00

Memo Item

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

600.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Baugh, Jakarri J, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 3601 W 120th St.  
2N

City Alsip State IL Zip Code 60803

Purpose of Disbursement  
Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 29 / 2024

FEC Identification Number: C  
Transaction ID : SB21B.45228  
Amount of Each Disbursement this Period: 150.00

Memo Item

**B. Baugh, Jakarri J, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 3601 W 120th St.  
2N

City Alsip State IL Zip Code 60803

Purpose of Disbursement  
Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 11 / 15 / 2024

FEC Identification Number: C  
Transaction ID : SB21B.45229  
Amount of Each Disbursement this Period: 225.00

Memo Item

**C. Baum, Andrew, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 3287 Avenida La Cima

City Carlsbad State CA Zip Code 92009

Purpose of Disbursement  
Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 29 / 2024

FEC Identification Number: C  
Transaction ID : SB21B.4523t  
Amount of Each Disbursement this Period: 150.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 525.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Baum, Andrew, , ,**

Mailing Address 3287 Avenida La Cima

City  
Carlsbad

State  
CA

Zip Code  
92009

Purpose of Disbursement

Strategic Consulting

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
11			15			2024			

FEC Identification Number

C [ ]

**Transaction ID : SB21B.45231**

Amount of Each Disbursement this Period

225.00
--------

Memo Item

Full Name (Last, First, Middle Initial)

**B. Baum, Shane M., , ,**

Mailing Address 3287 Avenida La Cima

City  
Carlsbad

State  
CA

Zip Code  
92009

Purpose of Disbursement

Strategic Consulting

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
10			29			2024			

FEC Identification Number

C [ ]

**Transaction ID : SB21B.45232**

Amount of Each Disbursement this Period

150.00
--------

Memo Item

Full Name (Last, First, Middle Initial)

**C. Baum, Shane M., , ,**

Mailing Address 3287 Avenida La Cima

City  
Carlsbad

State  
CA

Zip Code  
92009

Purpose of Disbursement

Strategic Consulting

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
11			15			2024			

FEC Identification Number

C [ ]

**Transaction ID : SB21B.45233**

Amount of Each Disbursement this Period

225.00
--------

Memo Item

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

600.00
--------

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

--

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Behravan, Rodin, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 39 Spinnaker

City Irvine State CA Zip Code 92614

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 29 / 2024

FEC Identification Number: C

Transaction ID : SB21B.45234

Amount of Each Disbursement this Period: 150.00

Memo Item

**B. Behravan, Rodin, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 39 Spinnaker

City Irvine State CA Zip Code 92614

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 15 / 2024

FEC Identification Number: C

Transaction ID : SB21B.45235

Amount of Each Disbursement this Period: 225.00

Memo Item

**C. Black, Lolajeanne, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 8828 E Riviera Dr.

City Scottsdale State AZ Zip Code 85260

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 29 / 2024

FEC Identification Number: C

Transaction ID : SB21B.45236

Amount of Each Disbursement this Period: 150.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 525.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Black, Lolajeanne, , ,**

Mailing Address 8828 E Riviera Dr.

City  
Scottsdale

State  
AZ

Zip Code  
85260

Purpose of Disbursement

Strategic Consulting

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
1	1		1	5		2	0	2	4

FEC Identification Number

**C**

**Transaction ID : SB21B.45237**

Amount of Each Disbursement this Period

2	2	5	0	0
---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

**B. Burrell, Tyrone M., , ,**

Mailing Address 805 Huckleberry Ln.

City  
Gretna

State  
LA

Zip Code  
70056

Purpose of Disbursement

Strategic Consulting

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
1	0		2	9		2	0	2	4

FEC Identification Number

**C**

**Transaction ID : SB21B.45238**

Amount of Each Disbursement this Period

1	5	0	0
---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

**C. Burrell, Tyrone M., , ,**

Mailing Address 805 Huckleberry Ln.

City  
Gretna

State  
LA

Zip Code  
70056

Purpose of Disbursement

Strategic Consulting

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
1	1		1	5		2	0	2	4

FEC Identification Number

**C**

**Transaction ID : SB21B.45238**

Amount of Each Disbursement this Period

1	5	0	0
---	---	---	---

Memo Item

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

5	2	5	0	0
---	---	---	---	---

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

5	2	5	0	0
---	---	---	---	---

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

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Cabello-Garcia, Hilda C., , ,**

Mailing Address 135 East 1st St.

City  
Stockton

State  
CA

Zip Code  
95206

Purpose of Disbursement

Strategic Consulting

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
10			29			2024			

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.45240**

Amount of Each Disbursement this Period

[REDACTED] 150.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Cabello-Garcia, Hilda C., , ,**

Mailing Address 135 East 1st St.

City  
Stockton

State  
CA

Zip Code  
95206

Purpose of Disbursement

Strategic Consulting

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
11			15			2024			

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.45241**

Amount of Each Disbursement this Period

[REDACTED] 225.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Cacnio, Jan Dwayne A., , ,**

Mailing Address 8822 N 40th Ave.

City  
Phoenix

State  
AZ

Zip Code  
85051

Purpose of Disbursement

Strategic Consulting

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
10			29			2024			

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.45242**

Amount of Each Disbursement this Period

[REDACTED] 150.00

Memo Item

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

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

[REDACTED] 525.00

[REDACTED]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

## YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial)

**A. Cacnio, Jan Dwayne A., , ,**

Mailing Address 8822 N 40th Ave.

City  
Phoenix

State  
AZ

Zip Code  
85051

Purpose of Disbursement

Strategic Consulting

Candidate Name

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2024			

FEC Identification Number

C [ ]

Transaction ID : SB21B.45243

Amount of Each Disbursement this Period

[ ] 225.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Cai, Jessie X., , ,**

Mailing Address 10304 Congressional Ct.

City  
Ellicott City

State  
MD

Zip Code  
21042

Purpose of Disbursement

Strategic Consulting

Candidate Name

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			29			2024			

FEC Identification Number

C [ ]

Transaction ID : SB21B.45244

Amount of Each Disbursement this Period

[ ] 150.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Cai, Jessie X., , ,**

Mailing Address 10304 Congressional Ct.

City  
Ellicott City

State  
MD

Zip Code  
21042

Purpose of Disbursement

Strategic Consulting

Candidate Name

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2024			

FEC Identification Number

C [ ]

Transaction ID : SB21B.45245

Amount of Each Disbursement this Period

[ ] 75.00

Memo Item

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

[ ] 450.00

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

[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Campbell, Isabella, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 15462 Arroyo Drive

City Irvine State CA Zip Code 92617

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 29 / 2024

FEC Identification Number: C

Transaction ID : SB21B.45246

Amount of Each Disbursement this Period: 150.00

Memo Item

**B. Campbell, Isabella, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 15462 Arroyo Drive

City Irvine State CA Zip Code 92617

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 15 / 2024

FEC Identification Number: C

Transaction ID : SB21B.45247

Amount of Each Disbursement this Period: 225.00

Memo Item

**C. Cao, Anson, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 466 58th St. 1F

City Brooklyn State NY Zip Code 11220

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 29 / 2024

FEC Identification Number: C

Transaction ID : SB21B.45248

Amount of Each Disbursement this Period: 150.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 525.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Cao, Anson, , ,**

Mailing Address 466 58th St.  
1F

City  
Brooklyn

State  
NY

Zip Code  
11220

Purpose of Disbursement  
Strategic Consulting

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
11			15			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45249**

Amount of Each Disbursement this Period

150.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Carman, Veronica, , ,**

Mailing Address 10488 Eastborne Ave.  
Apt 310

City  
Los Angeles

State  
CA

Zip Code  
90024

Purpose of Disbursement  
Strategic Consulting

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
10			29			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45250**

Amount of Each Disbursement this Period

75.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Carman, Veronica, , ,**

Mailing Address 10488 Eastborne Ave.  
Apt 310

City  
Los Angeles

State  
CA

Zip Code  
90024

Purpose of Disbursement  
Strategic Consulting

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
11			15			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45251**

Amount of Each Disbursement this Period

150.00

Memo Item

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

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

375.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Carter, Taylor A., , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 25480 Water Wheel Ct

City Menifee State CA Zip Code 92584

Purpose of Disbursement  
Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 29 / 2024

FEC Identification Number: C  
Transaction ID : SB21B.45252

Amount of Each Disbursement this Period: 75.00

Memo Item

**B. Carter, Taylor A., , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 25480 Water Wheel Ct

City Menifee State CA Zip Code 92584

Purpose of Disbursement  
Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 11 / 15 / 2024

FEC Identification Number: C  
Transaction ID : SB21B.45253

Amount of Each Disbursement this Period: 75.00

Memo Item

**C. Chavez, Noelia, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 205 W 26th St.

City Sanford State FL Zip Code 32773

Purpose of Disbursement  
Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 29 / 2024

FEC Identification Number: C  
Transaction ID : SB21B.45254

Amount of Each Disbursement this Period: 150.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 300.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Chavez, Noelia, , ,**

Mailing Address 205 W 26th St.

City  
Sanford

State  
FL

Zip Code  
32773

Purpose of Disbursement

Strategic Consulting

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
1	1	1		1	5			2	0	2	4		

FEC Identification Number

**C**

**Transaction ID : SB21B.45255**

Amount of Each Disbursement this Period

225.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Cho, Hannah, , ,**

Mailing Address 6201 Mirasol

City  
Irvine

State  
CA

Zip Code  
92620

Purpose of Disbursement

Strategic Consulting

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
1	0			2	9			2	0	2	4		

FEC Identification Number

**C**

**Transaction ID : SB21B.45256**

Amount of Each Disbursement this Period

150.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Cho, Hannah, , ,**

Mailing Address 6201 Mirasol

City  
Irvine

State  
CA

Zip Code  
92620

Purpose of Disbursement

Strategic Consulting

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
1	1			1	5			2	0	2	4		

FEC Identification Number

**C**

**Transaction ID : SB21B.45257**

Amount of Each Disbursement this Period

225.00

Memo Item

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

600.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Chow, Julia, , ,**

Mailing Address 7 Blueberry Hill Road

City  
Weston

State  
MA

Zip Code  
02493

Purpose of Disbursement

Strategic Consulting

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
10			29			2024			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.45258

Amount of Each Disbursement this Period

[REDACTED] 150.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Chow, Julia, , ,**

Mailing Address 7 Blueberry Hill Road

City  
Weston

State  
MA

Zip Code  
02493

Purpose of Disbursement

Strategic Consulting

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
11			15			2024			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.45259

Amount of Each Disbursement this Period

[REDACTED] 225.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Cooper, Mumtaz, , ,**

Mailing Address 565 Adams Ave.

City  
Elizabeth

State  
NJ

Zip Code  
07201

Purpose of Disbursement

Strategic Consulting

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
10			29			2024			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.4526t

Amount of Each Disbursement this Period

[REDACTED] 225.00

Memo Item

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

[REDACTED] 600.00

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

[REDACTED]

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

Form for line numbers 21b-30b with checkboxes. 21b is checked.

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

Form A: Cooper, Mumtaz, , ,
Mailing Address 565 Adams Ave.
City Elizabeth, State NJ, Zip Code 07201
Purpose of Disbursement: Strategic Consulting
Candidate Name:
Office Sought: House, Senate, President
Disbursement For: Primary, General, Other
Amount of Each Disbursement this Period: 225.00

Form B: Danan, Amelia K, , ,
Mailing Address 1775 Timber Trail
City Ann Arbor, State MI, Zip Code 48103
Purpose of Disbursement: Strategic Consulting
Candidate Name:
Office Sought: House, Senate, President
Disbursement For: Primary, General, Other
Amount of Each Disbursement this Period: 150.00

Form C: Danan, Amelia K, , ,
Mailing Address 1775 Timber Trail
City Ann Arbor, State MI, Zip Code 48103
Purpose of Disbursement: Strategic Consulting
Candidate Name:
Office Sought: House, Senate, President
Disbursement For: Primary, General, Other
Amount of Each Disbursement this Period: 150.00

SUBTOTAL of Disbursements This Page (optional)..... 525.00
TOTAL This Period (last page this line number only).....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Daranijoh, Hameed O., , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 4750 Bahama Lane

City Portage State MI Zip Code 49002

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 29 / 2024

FEC Identification Number: C

Transaction ID : SB21B.45264

Amount of Each Disbursement this Period: 150.00

Memo Item

**B. Daranijoh, Hameed O., , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 4750 Bahama Lane

City Portage State MI Zip Code 49002

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 15 / 2024

FEC Identification Number: C

Transaction ID : SB21B.45265

Amount of Each Disbursement this Period: 225.00

Memo Item

**C. Darrow, Lydia, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 370 Riverside Dr.  
7D

City New York State NY Zip Code 10025

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 29 / 2024

FEC Identification Number: C

Transaction ID : SB21B.45266

Amount of Each Disbursement this Period: 150.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 525.00

**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)

Form for line numbers 21b-30b with checkboxes. 21b is checked.

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

Form A: Darrow, Lydia, , , Disbursement details including date (11/15/2024), amount (225.00), and FEC ID (SB21B.45267).

Form B: Darrow, Lydia, , , Disbursement details including date (11/21/2024), amount (5.00), and FEC ID (SB21B.45776).

Form C: Dekle, Charlotte R., , , Disbursement details including date (10/29/2024), amount (150.00), and FEC ID (SB21B.45268).

SUBTOTAL of Disbursements This Page (optional) 380.00
TOTAL This Period (last page this line number only)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Dekle, Charlotte R., , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 428 Grand Avenue

City South Pasadena State CA Zip Code 91030

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 15 / 2024

FEC Identification Number: C

Transaction ID : SB21B.45269

Amount of Each Disbursement this Period: 225.00

Memo Item

**B. Dutta, Anya, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 1775 Westwind Way

City McLean State VA Zip Code 22102

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 29 / 2024

FEC Identification Number: C

Transaction ID : SB21B.45270

Amount of Each Disbursement this Period: 150.00

Memo Item

**C. Dutta, Anya, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 1775 Westwind Way

City McLean State VA Zip Code 22102

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 15 / 2024

FEC Identification Number: C

Transaction ID : SB21B.45271

Amount of Each Disbursement this Period: 225.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 600.00

**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)

Form for line numbers 21b-30b with checkboxes. 21b is checked.

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

Form A: Ebiye-Onyibe, Ebubechukwu, , , . Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, Amount of Each Disbursement, and Memo Item.

Form B: Ebiye-Onyibe, Ebubechukwu, , , . Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, Amount of Each Disbursement, and Memo Item.

Form C: Erdly-Liang, Miles, , , . Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, Amount of Each Disbursement, and Memo Item.

SUBTOTAL of Disbursements This Page (optional) 525.00
TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial) <b>A. Erdly-Liang, Miles, , ,</b>		Date of Disbursement MM / DD / YYYY 11 / 15 / 2024	
Mailing Address 40 Beechknoll Road		FEC Identification Number C [ ] <b>Transaction ID : SB21B.45275</b> Amount of Each Disbursement this Period [ ] 75.00	
City New York	State NY	Zip Code 11375	Category/ Type [ ]
Purpose of Disbursement Strategic Consulting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. Esayas, Joseias, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 29 / 2024	
Mailing Address 11810 Lelda Ln.		FEC Identification Number C [ ] <b>Transaction ID : SB21B.45276</b> Amount of Each Disbursement this Period [ ] 150.00	
City Houston	State TX	Zip Code 77071	Category/ Type [ ]
Purpose of Disbursement Strategic Consulting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. Esayas, Joseias, , ,</b>		Date of Disbursement MM / DD / YYYY 11 / 15 / 2024	
Mailing Address 11810 Lelda Ln.		FEC Identification Number C [ ] <b>Transaction ID : SB21B.45277</b> Amount of Each Disbursement this Period [ ] 150.00	
City Houston	State TX	Zip Code 77071	Category/ Type [ ]
Purpose of Disbursement Strategic Consulting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 375.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Esfandiari, Rose, , ,**

Mailing Address 112 Greenmoor

City  
Irvine

State  
CA

Zip Code  
92614

Purpose of Disbursement

Strategic Consulting

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY  
10 / 29 / 2024

FEC Identification Number

C [ ]

**Transaction ID : SB21B.45278**

Amount of Each Disbursement this Period

[ ] 150.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Esfandiari, Rose, , ,**

Mailing Address 112 Greenmoor

City  
Irvine

State  
CA

Zip Code  
92614

Purpose of Disbursement

Strategic Consulting

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY  
11 / 15 / 2024

FEC Identification Number

C [ ]

**Transaction ID : SB21B.45279**

Amount of Each Disbursement this Period

[ ] 225.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Fischer, Leah, , ,**

Mailing Address 1065 Napoli Drive

City  
Pacific Palisades

State  
CA

Zip Code  
90272

Purpose of Disbursement

Strategic Consulting

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY  
10 / 29 / 2024

FEC Identification Number

C [ ]

**Transaction ID : SB21B.4528t**

Amount of Each Disbursement this Period

[ ] 150.00

Memo Item

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

[ ] 525.00

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

[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Fischer, Leah, , ,**

Mailing Address 1065 Napoli Drive

City  
Pacific Palisades

State  
CA

Zip Code  
90272

Purpose of Disbursement

Strategic Consulting

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
11			15			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45281**

Amount of Each Disbursement this Period

225.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Flowers, Lonyah, , ,**

Mailing Address 44110 Carolside Avenue

City  
Lancaster

State  
CA

Zip Code  
93535

Purpose of Disbursement

Strategic Consulting

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
10			29			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45282**

Amount of Each Disbursement this Period

75.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Flowers, Lonyah, , ,**

Mailing Address 44110 Carolside Avenue

City  
Lancaster

State  
CA

Zip Code  
93535

Purpose of Disbursement

Strategic Consulting

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
11			15			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45283**

Amount of Each Disbursement this Period

225.00

Memo Item

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

525.00

**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)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Fox, Ruby H, , ,**

Mailing Address 10575 Bradbury Rd.

City  
Los Angeles

State  
CA

Zip Code  
90064

Purpose of Disbursement

Strategic Consulting

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  
10 / 28 / 2024

FEC Identification Number

C

**Transaction ID : SB21B.45192**

Amount of Each Disbursement this Period

155.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Garcia, Madeline G., , ,**

Mailing Address 207 Holiday Dr.

City  
Plainfield

State  
IN

Zip Code  
46168

Purpose of Disbursement

Strategic Consulting

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  
10 / 29 / 2024

FEC Identification Number

C

**Transaction ID : SB21B.45284**

Amount of Each Disbursement this Period

150.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Garcia, Madeline G., , ,**

Mailing Address 207 Holiday Dr.

City  
Plainfield

State  
IN

Zip Code  
46168

Purpose of Disbursement

Strategic Consulting

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  
11 / 15 / 2024

FEC Identification Number

C

**Transaction ID : SB21B.45284**

Amount of Each Disbursement this Period

225.00

Memo Item

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

530.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Ghalamsiah, Baback B., , ,**

Full Name (Last, First, Middle Initial)

Date of Disbursement: 10 / 29 / 2024

Mailing Address: 656 Grant Ave. Floor 1

City: Maywood State: NJ Zip Code: 07607

Purpose of Disbursement: Strategic Consulting

Candidate Name: [ ]

Category/Type: [ ]

Office Sought: [ ] House [ ] Senate [ ] President

Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼

State: District:

FEC Identification Number: C [ ]

Transaction ID : SB21B.45286

Amount of Each Disbursement this Period: 150.00

Memo Item

**B. Ghalamsiah, Baback B., , ,**

Full Name (Last, First, Middle Initial)

Date of Disbursement: 11 / 15 / 2024

Mailing Address: 656 Grant Ave. Floor 1

City: Maywood State: NJ Zip Code: 07607

Purpose of Disbursement: Strategic Consulting

Candidate Name: [ ]

Category/Type: [ ]

Office Sought: [ ] House [ ] Senate [ ] President

Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼

State: District:

FEC Identification Number: C [ ]

Transaction ID : SB21B.45287

Amount of Each Disbursement this Period: 225.00

Memo Item

**C. GoDaddy.com**

Full Name (Last, First, Middle Initial)

Date of Disbursement: 11 / 18 / 2024

Mailing Address: 2155 E. GoDaddy Way

City: Tempe State: AZ Zip Code: 85284

Purpose of Disbursement: Website Domain

Candidate Name: [ ]

Category/Type: [ ]

Office Sought: [ ] House [ ] Senate [ ] President

Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼

State: District:

FEC Identification Number: C [ ]

Transaction ID : SB21B.45802

Amount of Each Disbursement this Period: 204.04

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 579.04

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. GoDaddy.com**

Mailing Address 2155 E. GoDaddy Way

City  
Tempe

State  
AZ

Zip Code  
85284

Purpose of Disbursement

Website Domain

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
11			25			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45817**

Amount of Each Disbursement this Period

10.60
-------

Memo Item

Full Name (Last, First, Middle Initial)

**B. Goldberg, Yisroel, , ,**

Mailing Address 190-49 Nero Ave.

City  
Hollis

State  
NY

Zip Code  
11423

Purpose of Disbursement

Strategic Consulting

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
10			29			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45288**

Amount of Each Disbursement this Period

150.00
--------

Memo Item

Full Name (Last, First, Middle Initial)

**C. Goldberg, Yisroel, , ,**

Mailing Address 190-49 Nero Ave.

City  
Hollis

State  
NY

Zip Code  
11423

Purpose of Disbursement

Strategic Consulting

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
11			15			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45288**

Amount of Each Disbursement this Period

225.00
--------

Memo Item

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

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

385.60
--------

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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Green, Christina Marie B., , ,**

Mailing Address 218 Abbot Ave.

City  
Daly City

State  
CA

Zip Code  
94014

Purpose of Disbursement

Strategic Consulting

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
10			29			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45290**

Amount of Each Disbursement this Period

150.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Grisby, Kearra D., , ,**

Mailing Address 1184 Centennial Ct.

City  
Zachary

State  
LA

Zip Code  
70791

Purpose of Disbursement

Strategic Consulting

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
10			29			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45291**

Amount of Each Disbursement this Period

150.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Grisby, Kearra D., , ,**

Mailing Address 1184 Centennial Ct.

City  
Zachary

State  
LA

Zip Code  
70791

Purpose of Disbursement

Strategic Consulting

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
11			15			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45292**

Amount of Each Disbursement this Period

225.00

Memo Item

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

525.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Grosberg, Sasha J., , ,**

Mailing Address 3820 Locust Walk Rm 086653

City Philadelphia

State PA

Zip Code 19104

Purpose of Disbursement

Strategic Consulting

Candidate Name

Category/Type

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	9			2	0	2	4		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.45293

Amount of Each Disbursement this Period

[REDACTED] 150.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Grosberg, Sasha J., , ,**

Mailing Address 3820 Locust Walk Rm 086653

City Philadelphia

State PA

Zip Code 19104

Purpose of Disbursement

Strategic Consulting

Candidate Name

Category/Type

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			1	5			2	0	2	4		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.45294

Amount of Each Disbursement this Period

[REDACTED] 225.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Gupta, Yajat, , ,**

Mailing Address 188 Magnolia Drive

City Chester Springs

State PA

Zip Code 19425

Purpose of Disbursement

Strategic Consulting

Candidate Name

Category/Type

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	9			2	0	2	4		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.45295

Amount of Each Disbursement this Period

[REDACTED] 150.00

Memo Item

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

[REDACTED] 525.00

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

[REDACTED]

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

Form for line numbers 21b-30b with checkboxes. 21b is checked.

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)
YOUTH PROGRESSIVE ACTION CATALYST

Form A: Gupta, Yajat, , ,. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, Amount of Each Disbursement, and Memo Item.

Form B: Haffner, Lily D., , ,. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, Amount of Each Disbursement, and Memo Item.

Form C: Haffner, Lily D., , ,. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, Amount of Each Disbursement, and Memo Item.

SUBTOTAL of Disbursements This Page (optional) 600.00
TOTAL This Period (last page this line number only)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Hardy, Grace, , ,**

Mailing Address 142 S Kenter Avenue

City  
Los Angeles

State  
CA

Zip Code  
90049

Purpose of Disbursement

Strategic Consulting

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
10			29			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45299**

Amount of Each Disbursement this Period

150.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Hardy, Grace, , ,**

Mailing Address 142 S Kenter Avenue

City  
Los Angeles

State  
CA

Zip Code  
90049

Purpose of Disbursement

Strategic Consulting

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
11			15			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45300**

Amount of Each Disbursement this Period

225.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Hardy, Noelle E., , ,**

Mailing Address 142 South Kenter Avenue

City  
Los Angeles

State  
CA

Zip Code  
90049

Purpose of Disbursement

Strategic Consulting

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
10			29			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45301**

Amount of Each Disbursement this Period

150.00

Memo Item

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

525.00

**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)

Form for line numbers 21b-30b with checkboxes. 21b is checked.

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

Form A: Disbursement for Hardy, Noelle E. on 11/14/2024. Amount: 200.00. Transaction ID: SB21B.45646.

Form B: Disbursement for Hardy, Noelle E. on 11/15/2024. Amount: 225.00. Transaction ID: SB21B.45302.

Form C: Disbursement for Harris, Jamar M. on 10/29/2024. Amount: 75.00. Transaction ID: SB21B.45303.

SUBTOTAL of Disbursements This Page (optional) 500.00
TOTAL This Period (last page this line number only)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Harris, Jamar M., , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 3914 NC 126

City Morganton State NC Zip Code 28655

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 15 / 2024

FEC Identification Number: C

Transaction ID : SB21B.45304

Amount of Each Disbursement this Period: 150.00

Memo Item

**B. Henderson, Ashton K., , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 18521 Fleming Street

City Detroit State MI Zip Code 48234

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 29 / 2024

FEC Identification Number: C

Transaction ID : SB21B.45305

Amount of Each Disbursement this Period: 150.00

Memo Item

**C. Henderson, Ashton K., , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 18521 Fleming Street

City Detroit State MI Zip Code 48234

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 15 / 2024

FEC Identification Number: C

Transaction ID : SB21B.45306

Amount of Each Disbursement this Period: 225.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 525.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial) <b>A. Henderson, Keon J., , ,</b>			Date of Disbursement MM / DD / YYYY 10 / 29 / 2024		
Mailing Address 18521 Fleming St.					
City Detroit		State MI	Zip Code 48234		
Purpose of Disbursement Strategic Consulting				<input type="checkbox"/>	
Candidate Name				Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:	<input type="checkbox"/> Memo Item				

FEC Identification Number  
**C**

**Transaction ID : SB21B.45307**

Amount of Each Disbursement this Period  
150.00

Full Name (Last, First, Middle Initial) <b>B. Henderson, Keon J., , ,</b>			Date of Disbursement MM / DD / YYYY 11 / 15 / 2024		
Mailing Address 18521 Fleming St.					
City Detroit		State MI	Zip Code 48234		
Purpose of Disbursement Strategic Consulting				<input type="checkbox"/>	
Candidate Name				Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:	<input type="checkbox"/> Memo Item				

FEC Identification Number  
**C**

**Transaction ID : SB21B.45308**

Amount of Each Disbursement this Period  
225.00

Full Name (Last, First, Middle Initial) <b>C. Hinojosa, Victor R., , ,</b>			Date of Disbursement MM / DD / YYYY 10 / 29 / 2024		
Mailing Address 2424 Pearsall Pkwy.					
City Waukegan		State IL	Zip Code 60085		
Purpose of Disbursement Strategic Consulting				<input type="checkbox"/>	
Candidate Name				Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:	<input type="checkbox"/> Memo Item				

FEC Identification Number  
**C**

**Transaction ID : SB21B.45309**

Amount of Each Disbursement this Period  
150.00

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	525.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Hinojosa, Victor R., , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 2424 Pearsall Pkwy.

City Waukegan State IL Zip Code 60085

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 15 / 2024

FEC Identification Number: C

Transaction ID : SB21B.45310

Amount of Each Disbursement this Period: 225.00

Memo Item

**B. Hinsdale, Clara A., , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 2311 Prospect Street

City Berkeley State CA Zip Code 94704

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 29 / 2024

FEC Identification Number: C

Transaction ID : SB21B.45311

Amount of Each Disbursement this Period: 150.00

Memo Item

**C. Hinsdale, Clara A., , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 2311 Prospect Street

City Berkeley State CA Zip Code 94704

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 15 / 2024

FEC Identification Number: C

Transaction ID : SB21B.45312

Amount of Each Disbursement this Period: 225.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 600.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Hoban, Roshan H., , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 101 Abraham Drive

City Newtown State PA Zip Code 18940

Purpose of Disbursement  
Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 29 / 2024

FEC Identification Number: C  
Transaction ID : SB21B.45313  
Amount of Each Disbursement this Period: 150.00

Memo Item

**B. Hoban, Roshan H., , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 101 Abraham Drive

City Newtown State PA Zip Code 18940

Purpose of Disbursement  
Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 11 / 15 / 2024

FEC Identification Number: C  
Transaction ID : SB21B.45314  
Amount of Each Disbursement this Period: 225.00

Memo Item

**C. Hoban, Roshan H., , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 101 Abraham Drive

City Newtown State PA Zip Code 18940

Purpose of Disbursement  
Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 11 / 21 / 2024

FEC Identification Number: C  
Transaction ID : SB21B.45774  
Amount of Each Disbursement this Period: 5.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 380.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Hu, Yenjay, , ,**

Mailing Address 215 Midwood Pl.

City  
Westfield

State  
NJ

Zip Code  
07090

Purpose of Disbursement

Strategic Consulting

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
10			29			2024			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.45316

Amount of Each Disbursement this Period

[REDACTED]	150.00
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Memo Item

Full Name (Last, First, Middle Initial)

**B. Hu, Yenjay, , ,**

Mailing Address 215 Midwood Pl.

City  
Westfield

State  
NJ

Zip Code  
07090

Purpose of Disbursement

Strategic Consulting

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
11			15			2024			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.45317

Amount of Each Disbursement this Period

[REDACTED]	225.00
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Memo Item

Full Name (Last, First, Middle Initial)

**C. Jackson, Destiny, , ,**

Mailing Address 152 Vine St SW  
Apt 212

City  
Atlanta

State  
GA

Zip Code  
30314

Purpose of Disbursement

Strategic Consulting

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
11			13			2024			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.45631

Amount of Each Disbursement this Period

[REDACTED]	160.82
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Memo Item

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

[REDACTED]	535.82
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**TOTAL** This Period (last page this line number only)..... ▶

[REDACTED]	
------------	--

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

Form for line numbers 21b-30b with checkboxes. 21b is checked.

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

Form A: Disbursement for Jameson, Olivia S., , , on 10/29/2024. Amount: 155.00. Transaction ID: SB21B.45318.

Form B: Disbursement for Jameson, Olivia S., , , on 11/15/2024. Amount: 225.00. Transaction ID: SB21B.45319.

Form C: Disbursement for Jameson, Olivia S., , , on 11/15/2024. Amount: 150.00. Transaction ID: SB21B.45713.

SUBTOTAL of Disbursements This Page (optional) 530.00
TOTAL This Period (last page this line number only)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Jameson, Olivia S., , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 792 Neilson St.

City Berkeley State CA Zip Code 94707

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 21 / 2024

FEC Identification Number: C

Transaction ID : SB21B.45777

Amount of Each Disbursement this Period: 75.00

Memo Item

**B. Johnson, Samantha, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 818 D St. Apt #8

City Sacramento State CA Zip Code 95814

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 15 / 2024

FEC Identification Number: C

Transaction ID : SB21B.45320

Amount of Each Disbursement this Period: 225.00

Memo Item

**C. Jones, Akeelah, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 222 Tuskegee St. SE Apt 411

City Atlanta State GA Zip Code 30315

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 29 / 2024

FEC Identification Number: C

Transaction ID : SB21B.45321

Amount of Each Disbursement this Period: 150.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 450.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Jones, Akeelah, , ,**

Mailing Address 222 Tuskegee St. SE  
Apt 411

City Atlanta State GA Zip Code 30315

Purpose of Disbursement

Strategic Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45322**

Amount of Each Disbursement this Period

225.00
--------

Memo Item

Full Name (Last, First, Middle Initial)

**B. Jones, Brooke C., , ,**

Mailing Address 11 Riverside Lane

City Easton State CT Zip Code 06612

Purpose of Disbursement

Strategic Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			29			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45323**

Amount of Each Disbursement this Period

150.00
--------

Memo Item

Full Name (Last, First, Middle Initial)

**C. Jones, Brooke C., , ,**

Mailing Address 11 Riverside Lane

City Easton State CT Zip Code 06612

Purpose of Disbursement

Strategic Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45324**

Amount of Each Disbursement this Period

225.00
--------

Memo Item

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

600.00
--------

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

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

Form for line numbers 21b-30b with checkboxes. 21b is checked.

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

Form A: Disbursement for Kersh, John J., , , on 10/29/2024. Amount: 150.00. Transaction ID: SB21B.45325.

Form B: Disbursement for Kersh, John J., , , on 11/15/2024. Amount: 225.00. Transaction ID: SB21B.45326.

Form C: Disbursement for Khan, Riz, , , on 10/29/2024. Amount: 150.00. Transaction ID: SB21B.45327.

SUBTOTAL of Disbursements This Page (optional) 525.00
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)

Form for line numbers 21b-30b with checkboxes. 21b is checked.

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

Form A: Khan, Riz, , ,. Includes fields for Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

Form B: Khdlaryan, Jasmine, , ,. Includes fields for Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

Form C: Khdlaryan, Jasmine, , ,. Includes fields for Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

SUBTOTAL of Disbursements This Page (optional) 600.00
TOTAL This Period (last page this line number only)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial) <b>A. Klein, Jacob D., , ,</b>			Date of Disbursement MM / DD / YYYY 10 / 29 / 2024	
Mailing Address 1212 Alvarado Avenue Apt 6			FEC Identification Number C [ ] <b>Transaction ID : SB21B.45331</b> Amount of Each Disbursement this Period [ ] 150.00	
City Davis	State CA	Zip Code 95616	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Strategic Consulting		Category/ Type [ ]	Memo Item <input type="checkbox"/>	
Candidate Name			Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Klein, Jacob D., , ,</b>			Date of Disbursement MM / DD / YYYY 11 / 15 / 2024	
Mailing Address 1212 Alvarado Avenue Apt 6			FEC Identification Number C [ ] <b>Transaction ID : SB21B.45332</b> Amount of Each Disbursement this Period [ ] 225.00	
City Davis	State CA	Zip Code 95616	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Strategic Consulting		Category/ Type [ ]	Memo Item <input type="checkbox"/>	
Candidate Name			Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Kosimova, Sevinch E., , ,</b>			Date of Disbursement MM / DD / YYYY 10 / 29 / 2024	
Mailing Address 2311 Prospect St.			FEC Identification Number C [ ] <b>Transaction ID : SB21B.45333</b> Amount of Each Disbursement this Period [ ] 150.00	
City Berkeley	State CA	Zip Code 94704	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Strategic Consulting		Category/ Type [ ]	Memo Item <input type="checkbox"/>	
Candidate Name			Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 525.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Kosimova, Sevinch E., , ,**

Mailing Address 2311 Prospect St.

City  
Berkeley

State  
CA

Zip Code  
94704

Purpose of Disbursement

Strategic Consulting

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
11			15			2024			

FEC Identification Number

C [ ]

**Transaction ID : SB21B.45334**

Amount of Each Disbursement this Period

[ ] 225.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Kutko, Sophia M., , ,**

Mailing Address 5100 Randall Lane

City  
Bethesda

State  
MD

Zip Code  
20816

Purpose of Disbursement

Strategic Consulting

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
10			29			2024			

FEC Identification Number

C [ ]

**Transaction ID : SB21B.45335**

Amount of Each Disbursement this Period

[ ] 150.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Kutko, Sophia M., , ,**

Mailing Address 5100 Randall Lane

City  
Bethesda

State  
MD

Zip Code  
20816

Purpose of Disbursement

Strategic Consulting

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
11			15			2024			

FEC Identification Number

C [ ]

**Transaction ID : SB21B.45336**

Amount of Each Disbursement this Period

[ ] 225.00

Memo Item

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

[ ] 600.00

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

[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Kuyilath, Tara S., , ,**

Mailing Address 10647 Star Thistle Ct.

City  
Highlands Ranch

State  
CO

Zip Code  
80126

Purpose of Disbursement

Strategic Consulting

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
10			29			2024			

FEC Identification Number

C [ ]

**Transaction ID : SB21B.45337**

Amount of Each Disbursement this Period

[ ] 150.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Kuyilath, Tara S., , ,**

Mailing Address 10647 Star Thistle Ct.

City  
Highlands Ranch

State  
CO

Zip Code  
80126

Purpose of Disbursement

Strategic Consulting

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
11			15			2024			

FEC Identification Number

C [ ]

**Transaction ID : SB21B.45338**

Amount of Each Disbursement this Period

[ ] 225.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Landeros, Luis, , ,**

Mailing Address 2441 Haste St.  
NS-204A-1AS & RM 204

City  
Berkeley

State  
CA

Zip Code  
94704

Purpose of Disbursement

Strategic Consulting

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
10			29			2024			

FEC Identification Number

C [ ]

**Transaction ID : SB21B.45338**

Amount of Each Disbursement this Period

[ ] 150.00

Memo Item

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

[ ] 525.00

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

[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Landeros, Luis, , ,**

Mailing Address 2441 Haste St.  
NS-204A-1AS & RM 204

City Berkeley State CA Zip Code 94704

Purpose of Disbursement

Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45340**

Amount of Each Disbursement this Period

225.00
--------

Memo Item

Full Name (Last, First, Middle Initial)

**B. Landin, Cameron F., , ,**

Mailing Address 3005 River Drive  
Apt. 106

City Thunderbolt State GA Zip Code 31404

Purpose of Disbursement

Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			29			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45341**

Amount of Each Disbursement this Period

150.00
--------

Memo Item

Full Name (Last, First, Middle Initial)

**C. Landin, Cameron F., , ,**

Mailing Address 3005 River Drive  
Apt. 106

City Thunderbolt State GA Zip Code 31404

Purpose of Disbursement

Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45342**

Amount of Each Disbursement this Period

225.00
--------

Memo Item

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

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

600.00
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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A.** Full Name (Last, First, Middle Initial)  
**Lockhart, Mikhael L., , ,**

Mailing Address 441 Fulton Street

City Elizabeth State NJ Zip Code 07206

Purpose of Disbursement  
Strategic Consulting

Candidate Name

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

State: District:

Date of Disbursement: 10 / 29 / 2024

FEC Identification Number: C  
Transaction ID : SB21B.45343  
Amount of Each Disbursement this Period: 150.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Lockhart, Mikhael L., , ,**

Mailing Address 441 Fulton Street

City Elizabeth State NJ Zip Code 07206

Purpose of Disbursement  
Strategic Consulting

Candidate Name

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

State: District:

Date of Disbursement: 11 / 15 / 2024

FEC Identification Number: C  
Transaction ID : SB21B.45344  
Amount of Each Disbursement this Period: 225.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Lopez-DuBoff, Taliek I., , ,**

Mailing Address 1225 SW 163rd Ave.  
APT 107

City Beaverton State OR Zip Code 97006

Purpose of Disbursement  
Strategic Consulting

Candidate Name

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

State: District:

Date of Disbursement: 10 / 29 / 2024

FEC Identification Number: C  
Transaction ID : SB21B.45345  
Amount of Each Disbursement this Period: 150.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 525.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Lopez-DuBoff, Taliek I., , ,**

Mailing Address 1225 SW 163rd Ave.  
APT 107

City  
Beaverton

State  
OR

Zip Code  
97006

Purpose of Disbursement

Strategic Consulting

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
1	1		1	5		2	0	2	4

FEC Identification Number

**C**  
**Transaction ID : SB21B.45346**

Amount of Each Disbursement this Period

75.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Loyd, Tahn F., , ,**

Mailing Address 7719 Countryside Dr.

City  
Bloomington

State  
MN

Zip Code  
55438

Purpose of Disbursement

Strategic Consulting

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
1	0		2	9		2	0	2	4

FEC Identification Number

**C**  
**Transaction ID : SB21B.45347**

Amount of Each Disbursement this Period

150.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Loyd, Tahn F., , ,**

Mailing Address 7719 Countryside Dr.

City  
Bloomington

State  
MN

Zip Code  
55438

Purpose of Disbursement

Strategic Consulting

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
1	1		1	5		2	0	2	4

FEC Identification Number

**C**  
**Transaction ID : SB21B.45348**

Amount of Each Disbursement this Period

225.00

Memo Item

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

450.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Maffeo, Kathryn I., , ,**

Mailing Address 2572 Fairmont Avenue

City  
Clovis

State  
CA

Zip Code  
93611

Purpose of Disbursement

Strategic Consulting

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
10			29			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45349**

Amount of Each Disbursement this Period

150.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Maffeo, Kathryn I., , ,**

Mailing Address 2572 Fairmont Avenue

City  
Clovis

State  
CA

Zip Code  
93611

Purpose of Disbursement

Strategic Consulting

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
11			15			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45350**

Amount of Each Disbursement this Period

225.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Mailchimp**

Mailing Address 405 N Angier Ave. NE.

City  
Atlanta

State  
GA

Zip Code  
30308

Purpose of Disbursement

Software

Candidate Name

Category/  
Type

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			18			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45803**

Amount of Each Disbursement this Period

116.60

Memo Item

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

491.60

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial) <b>A. Malagar, Mathew G., , ,</b>			Date of Disbursement MM / DD / YYYY 10 / 29 / 2024	
Mailing Address 1552 Kalua Lane				
City Tustin	State CA	Zip Code 92780	FEC Identification Number C	
Purpose of Disbursement Strategic Consulting		Category/ Type	Transaction ID : <b>SB21B.45351</b>	
Candidate Name			Amount of Each Disbursement this Period 150.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Malagar, Mathew G., , ,</b>			Date of Disbursement MM / DD / YYYY 11 / 15 / 2024	
Mailing Address 1552 Kalua Lane				
City Tustin	State CA	Zip Code 92780	FEC Identification Number C	
Purpose of Disbursement Strategic Consulting		Category/ Type	Transaction ID : <b>SB21B.45352</b>	
Candidate Name			Amount of Each Disbursement this Period 225.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Marant, Olivia L., , ,</b>			Date of Disbursement MM / DD / YYYY 10 / 29 / 2024	
Mailing Address 506 Idlewild Dr B				
City Houma	State LA	Zip Code 70364	FEC Identification Number C	
Purpose of Disbursement Strategic Consulting		Category/ Type	Transaction ID : <b>SB21B.45353</b>	
Candidate Name			Amount of Each Disbursement this Period 75.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	450.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Marant, Olivia L., , ,**

Mailing Address 506 Idlewild Dr  
B

City  
Houma

State  
LA

Zip Code  
70364

Purpose of Disbursement

Strategic Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45354**

Amount of Each Disbursement this Period

225.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Margolis, Naomi, , ,**

Mailing Address 7605 SE 18th Avenue

City  
Portland

State  
OR

Zip Code  
97202

Purpose of Disbursement

Strategic Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			29			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45355**

Amount of Each Disbursement this Period

150.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Margolis, Naomi, , ,**

Mailing Address 7605 SE 18th Avenue

City  
Portland

State  
OR

Zip Code  
97202

Purpose of Disbursement

Strategic Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45356**

Amount of Each Disbursement this Period

225.00

Memo Item

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

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

600.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial) <b>A. Mashrah, Rwan, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 29 / 2024	
Mailing Address 7757 Neckel St.		FEC Identification Number C [ ] <b>Transaction ID : SB21B.45201</b> Amount of Each Disbursement this Period [ ] 150.00	
City Dearborn	State MI	Zip Code 48126	Category/ Type [ ]
Purpose of Disbursement Strategic Consulting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. Mashrah, Rwan, , ,</b>		Date of Disbursement MM / DD / YYYY 11 / 15 / 2024	
Mailing Address 7757 Neckel St.		FEC Identification Number C [ ] <b>Transaction ID : SB21B.45729</b> Amount of Each Disbursement this Period [ ] 225.00	
City Dearborn	State MI	Zip Code 48126	Category/ Type [ ]
Purpose of Disbursement Strategic Consulting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. Matsumoto, Samuel, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 29 / 2024	
Mailing Address 15119 Killion St.		FEC Identification Number C [ ] <b>Transaction ID : SB21B.45357</b> Amount of Each Disbursement this Period [ ] 150.00	
City Sherman Oaks	State CA	Zip Code 91411	Category/ Type [ ]
Purpose of Disbursement Strategic Consulting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 525.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Matsumoto, Samuel, , ,**

Mailing Address 15119 Killion St.

City  
Sherman Oaks

State  
CA

Zip Code  
91411

Purpose of Disbursement

Strategic Consulting

Candidate Name

Category/  
Type

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		1	5			2	0	2	4		

FEC Identification Number

**C**

**Transaction ID : SB21B.45358**

Amount of Each Disbursement this Period

225.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Mellijor, Matthew N., , ,**

Mailing Address 1136 Veranda Court

City  
Folsom

State  
CA

Zip Code  
95630

Purpose of Disbursement

Strategic Consulting

Candidate Name

Category/  
Type

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	9			2	0	2	4		

FEC Identification Number

**C**

**Transaction ID : SB21B.45359**

Amount of Each Disbursement this Period

150.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Mellijor, Matthew N., , ,**

Mailing Address 1136 Veranda Court

City  
Folsom

State  
CA

Zip Code  
95630

Purpose of Disbursement

Strategic Consulting

Candidate Name

Category/  
Type

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			1	5			2	0	2	4		

FEC Identification Number

**C**

**Transaction ID : SB21B.4536t**

Amount of Each Disbursement this Period

225.00

Memo Item

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

600.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Merera, Lamerot S., , ,**

Mailing Address 924 S Hobart Blvd.  
608

City  
Los Angeles

State  
CA

Zip Code  
90006

Purpose of Disbursement

Strategic Consulting

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
10			29			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45361**

Amount of Each Disbursement this Period

150.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Merera, Lamerot S., , ,**

Mailing Address 924 S Hobart Blvd.  
608

City  
Los Angeles

State  
CA

Zip Code  
90006

Purpose of Disbursement

Strategic Consulting

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
11			15			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45362**

Amount of Each Disbursement this Period

225.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Meta**

Mailing Address 1 Meta Way

City  
Menlo Park

State  
CA

Zip Code  
94025

Purpose of Disbursement

Advertising - Not Candidate Specific

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
10			25			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45181**

Amount of Each Disbursement this Period

30.00

Memo Item

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

405.00

**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)

Form with checkboxes for line numbers 21b, 22, 23, 26, 27, 28a, 28b, 28c, 29, 30b.

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NAME OF COMMITTEE (In Full)

YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial)

A. Meta

Mailing Address 1 Meta Way

City Menlo Park State CA Zip Code 94025

Purpose of Disbursement Advertising - Not Candidate Specific

Candidate Name

Office Sought: House, Senate, President; State: District

Disbursement For: Primary, General, Other (specify)

Category/Type

Date of Disbursement

Date selection box: 10 / 25 / 2024

FEC Identification Number

FEC ID input field: C

Transaction ID : SB21B.45184 Amount of Each Disbursement this Period

Amount input field: 21.00

Memo Item checkbox

Full Name (Last, First, Middle Initial)

B. Meta

Mailing Address 1 Meta Way

City Menlo Park State CA Zip Code 94025

Purpose of Disbursement Advertising - Not Candidate Specific

Candidate Name

Office Sought: House, Senate, President; State: District

Disbursement For: Primary, General, Other (specify)

Category/Type

Date of Disbursement

Date selection box: 10 / 28 / 2024

FEC Identification Number

FEC ID input field: C

Transaction ID : SB21B.45188 Amount of Each Disbursement this Period

Amount input field: 30.00

Memo Item checkbox

Full Name (Last, First, Middle Initial)

C. Meta

Mailing Address 1 Meta Way

City Menlo Park State CA Zip Code 94025

Purpose of Disbursement Advertising - Not Candidate Specific

Candidate Name

Office Sought: House, Senate, President; State: District

Disbursement For: Primary, General, Other (specify)

Category/Type

Date of Disbursement

Date selection box: 10 / 28 / 2024

FEC Identification Number

FEC ID input field: C

Transaction ID : SB21B.45191 Amount of Each Disbursement this Period

Amount input field: 1.33

Memo Item checkbox

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

Subtotal input field: 52.33

Total input field

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

### A. Meta

Mailing Address 1 Meta Way

City  
Menlo Park

State  
CA

Zip Code  
94025

Purpose of Disbursement  
Advertising - Not Candidate Specific

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	0			2	0	2	4		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.45200

Amount of Each Disbursement this Period

[REDACTED] 33.00

Memo Item

Full Name (Last, First, Middle Initial)

### B. Meta

Mailing Address 1 Meta Way

City  
Menlo Park

State  
CA

Zip Code  
94025

Purpose of Disbursement  
Advertising - Not Candidate Specific

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	0			2	0	2	4		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.45488

Amount of Each Disbursement this Period

[REDACTED] 37.00

Memo Item

Full Name (Last, First, Middle Initial)

### C. Meta

Mailing Address 1 Meta Way

City  
Menlo Park

State  
CA

Zip Code  
94025

Purpose of Disbursement  
Advertising - Not Candidate Specific

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	4			2	0	2	4		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.45488

Amount of Each Disbursement this Period

[REDACTED] 41.00

Memo Item

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

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

[REDACTED] 111.00

[REDACTED]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

### A. Meta

Mailing Address 1 Meta Way

City  
Menlo Park

State  
CA

Zip Code  
94025

Purpose of Disbursement  
Advertising - Not Candidate Specific

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
1	1		1	2		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.45498

Amount of Each Disbursement this Period

[REDACTED] 46.00

Memo Item

Full Name (Last, First, Middle Initial)

### B. Meta

Mailing Address 1 Meta Way

City  
Menlo Park

State  
CA

Zip Code  
94025

Purpose of Disbursement  
Advertising - Not Candidate Specific

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
1	1		1	4		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.45800

Amount of Each Disbursement this Period

[REDACTED] 51.00

Memo Item

Full Name (Last, First, Middle Initial)

### C. Mithani, Alisha M., , ,

Mailing Address 816 Timber View Dr.

City  
Bedford

State  
TX

Zip Code  
76021

Purpose of Disbursement  
Strategic Consulting

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
1	0		2	9		2	0	2	4

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.45363

Amount of Each Disbursement this Period

[REDACTED] 150.00

Memo Item

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

[REDACTED] 247.00

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

[REDACTED]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Mithani, Alisha M., , ,**

Mailing Address 816 Timber View Dr.

City  
Bedford

State  
TX

Zip Code  
76021

Purpose of Disbursement

Strategic Consulting

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
11			15			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45364**

Amount of Each Disbursement this Period

225.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Monti, Mary C., , ,**

Mailing Address 1000 New Jersey Avenue Southeast  
Apt 228

City  
Washington

State  
DC

Zip Code  
20003

Purpose of Disbursement

Strategic Consulting

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
10			29			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45365**

Amount of Each Disbursement this Period

150.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Monti, Mary C., , ,**

Mailing Address 1000 New Jersey Avenue Southeast  
Apt 228

City  
Washington

State  
DC

Zip Code  
20003

Purpose of Disbursement

Strategic Consulting

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
11			15			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45366**

Amount of Each Disbursement this Period

225.00

Memo Item

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

600.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Moreno, Taino, , ,**

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM / DD / YYYY  
10 / 29 / 2024

Mailing Address: 2020 Vanderbilt Lane Apt 2

City: Redondo Beach State: CA Zip Code: 90278

Purpose of Disbursement: Strategic Consulting

Candidate Name: [ ] Category/Type

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

State: District:

FEC Identification Number: C [ ]  
**Transaction ID : SB21B.45367**  
Amount of Each Disbursement this Period: [ ] 150.00

Memo Item

**B. Moreno, Taino, , ,**

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM / DD / YYYY  
11 / 15 / 2024

Mailing Address: 2020 Vanderbilt Lane Apt 2

City: Redondo Beach State: CA Zip Code: 90278

Purpose of Disbursement: Strategic Consulting

Candidate Name: [ ] Category/Type

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

State: District:

FEC Identification Number: C [ ]  
**Transaction ID : SB21B.45368**  
Amount of Each Disbursement this Period: [ ] 225.00

Memo Item

**C. Moyao-Ramirez, Arli, , ,**

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM / DD / YYYY  
10 / 29 / 2024

Mailing Address: 333 East 138th Street Apt#2E

City: Bronx State: NY Zip Code: 10454

Purpose of Disbursement: Strategic Consulting

Candidate Name: [ ] Category/Type

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

State: District:

FEC Identification Number: C [ ]  
**Transaction ID : SB21B.45366**  
Amount of Each Disbursement this Period: [ ] 150.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ [ ] 525.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial) <b>A. Moyao-Ramirez, Arli, , ,</b>			Date of Disbursement MM / DD / YYYY <b>11 / 15 / 2024</b>	
Mailing Address <b>333 East 138th Street Apt#2E</b>			FEC Identification Number <b>C</b>	
City <b>Bronx</b>	State <b>NY</b>	Zip Code <b>10454</b>	Transaction ID : <b>SB21B.45370</b>	
Purpose of Disbursement <b>Strategic Consulting</b>			Amount of Each Disbursement this Period <b>75.00</b>	
Candidate Name			Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Murray, Aaliyah A., , ,</b>			Date of Disbursement MM / DD / YYYY <b>11 / 15 / 2024</b>	
Mailing Address <b>1105 W 28th St</b>			FEC Identification Number <b>C</b>	
City <b>Minneapolis</b>	State <b>MN</b>	Zip Code <b>55408</b>	Transaction ID : <b>SB21B.45373</b>	
Purpose of Disbursement <b>Strategic Consulting</b>			Amount of Each Disbursement this Period <b>75.00</b>	
Candidate Name			Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Nadathur, Shruthi, , ,</b>			Date of Disbursement MM / DD / YYYY <b>10 / 29 / 2024</b>	
Mailing Address <b>8413 Brooksby Dr.</b>			FEC Identification Number <b>C</b>	
City <b>Plano</b>	State <b>TX</b>	Zip Code <b>75024</b>	Transaction ID : <b>SB21B.45374</b>	
Purpose of Disbursement <b>Strategic Consulting</b>			Amount of Each Disbursement this Period <b>150.00</b>	
Candidate Name			Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	<b>300.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Nadathur, Shruthi, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 8413 Brooksby Dr.

City Plano State TX Zip Code 75024

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 15 / 2024

FEC Identification Number: C

Transaction ID : SB21B.45375

Amount of Each Disbursement this Period: 225.00

Memo Item

**B. Narang, Jenya, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 1 Sherwood Court

City Livingston State NJ Zip Code 07039

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 29 / 2024

FEC Identification Number: C

Transaction ID : SB21B.45376

Amount of Each Disbursement this Period: 150.00

Memo Item

**C. Narang, Jenya, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 1 Sherwood Court

City Livingston State NJ Zip Code 07039

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 15 / 2024

FEC Identification Number: C

Transaction ID : SB21B.45377

Amount of Each Disbursement this Period: 225.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 600.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial) <b>A. Nguyen, Vincent N., , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 29 / 2024	
Mailing Address 2261 Tywood Ct.		FEC Identification Number C [ ] <b>Transaction ID : SB21B.45378</b> Amount of Each Disbursement this Period [ ] 150.00	
City San Jose	State CA	Zip Code 95116	Category/ Type [ ]
Purpose of Disbursement Strategic Consulting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. Nguyen, Vincent N., , ,</b>		Date of Disbursement MM / DD / YYYY 11 / 15 / 2024	
Mailing Address 2261 Tywood Ct.		FEC Identification Number C [ ] <b>Transaction ID : SB21B.45379</b> Amount of Each Disbursement this Period [ ] 225.00	
City San Jose	State CA	Zip Code 95116	Category/ Type [ ]
Purpose of Disbursement Strategic Consulting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. Owens, Raven E., , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 29 / 2024	
Mailing Address 1705 NE 24th St		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4538c</b> Amount of Each Disbursement this Period [ ] 150.00	
City Oklahoma City	State OK	Zip Code 73111	Category/ Type [ ]
Purpose of Disbursement Strategic Consulting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 525.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Owens, Raven E., , ,**

Mailing Address 1705 NE 24th St

City  
Oklahoma City

State  
OK

Zip Code  
73111

Purpose of Disbursement

Strategic Consulting

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
1	1		1	5		2	0	2	4

FEC Identification Number

**C** \_\_\_\_\_

**Transaction ID : SB21B.45381**

Amount of Each Disbursement this Period

2	2	5	0	0	0
---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

**B. Packer, Izabella, , ,**

Mailing Address 235 Hoyt St.  
12 G

City  
Brooklyn

State  
NY

Zip Code  
11217

Purpose of Disbursement

Strategic Consulting

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
1	0		2	9		2	0	2	4

FEC Identification Number

**C** \_\_\_\_\_

**Transaction ID : SB21B.45382**

Amount of Each Disbursement this Period

1	5	0	0	0	0
---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

**C. Packer, Izabella, , ,**

Mailing Address 235 Hoyt St.  
12 G

City  
Brooklyn

State  
NY

Zip Code  
11217

Purpose of Disbursement

Strategic Consulting

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
1	1		1	5		2	0	2	4

FEC Identification Number

**C** \_\_\_\_\_

**Transaction ID : SB21B.45383**

Amount of Each Disbursement this Period

2	2	5	0	0	0
---	---	---	---	---	---

Memo Item

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

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

6	0	0	0	0	0
---	---	---	---	---	---

6	0	0	0	0	0
---	---	---	---	---	---

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Paredes, Rania E., , ,**

Mailing Address 16846 San Jose St.

City Granada Hills State CA Zip Code 91344

Purpose of Disbursement

Strategic Consulting

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
10			29			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45384**

Amount of Each Disbursement this Period

150.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Paredes, Rania E., , ,**

Mailing Address 16846 San Jose St.

City Granada Hills State CA Zip Code 91344

Purpose of Disbursement

Strategic Consulting

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
11			15			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45385**

Amount of Each Disbursement this Period

225.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Parker, jaime c., , ,**

Mailing Address 4019 Chatfield Ln.

City Troy State MI Zip Code 48098

Purpose of Disbursement

Strategic Consulting

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
10			29			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45386**

Amount of Each Disbursement this Period

150.00

Memo Item

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

525.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Parker, jaime c., , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 4019 Chatfield Ln.

City Troy State MI Zip Code 48098

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 15 / 2024

FEC Identification Number: C

Transaction ID : SB21B.45387

Amount of Each Disbursement this Period: 225.00

Memo Item

**B. Pascual, Juliana, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 201 Grand Avenue Apt. #1

City Leonia State NJ Zip Code 07605

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 29 / 2024

FEC Identification Number: C

Transaction ID : SB21B.45388

Amount of Each Disbursement this Period: 150.00

Memo Item

**C. Pascual, Juliana, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 201 Grand Avenue Apt. #1

City Leonia State NJ Zip Code 07605

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 15 / 2024

FEC Identification Number: C

Transaction ID : SB21B.45388

Amount of Each Disbursement this Period: 225.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 600.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)

## YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial)

**A. Patkar, Neha J., , ,**

Mailing Address 283 Main St  
Apt 3

City  
Charlestown

State  
MA

Zip Code  
02129

Purpose of Disbursement  
Strategic Consulting

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
10			29			2024			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.45390

Amount of Each Disbursement this Period

[REDACTED] 150.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Patkar, Neha J., , ,**

Mailing Address 283 Main St  
Apt 3

City  
Charlestown

State  
MA

Zip Code  
02129

Purpose of Disbursement  
Strategic Consulting

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
11			15			2024			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.45391

Amount of Each Disbursement this Period

[REDACTED] 225.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Pineda Jimenez, Madelyn A., , ,**

Mailing Address 2079 Tilia St.  
Apt #206

City  
Davis

State  
CA

Zip Code  
95616

Purpose of Disbursement  
Strategic Consulting

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
10			29			2024			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.45392

Amount of Each Disbursement this Period

[REDACTED] 150.00

Memo Item

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

[REDACTED] 525.00

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

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial) <b>A. Pineda Jimenez, Madelyn A., , ,</b>		Date of Disbursement MM / DD / YYYY 11 / 15 / 2024	
Mailing Address 2079 Tilia St. Apt #206		FEC Identification Number C [ ] <b>Transaction ID : SB21B.45393</b> Amount of Each Disbursement this Period [ ] 225.00	
City Davis	State CA	Zip Code 95616	Category/ Type [ ]
Purpose of Disbursement Strategic Consulting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Player, Chasity R., , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 29 / 2024	
Mailing Address 227 Cork Alley		FEC Identification Number C [ ] <b>Transaction ID : SB21B.45394</b> Amount of Each Disbursement this Period [ ] 150.00	
City Madison	State AL	Zip Code 35758	Category/ Type [ ]
Purpose of Disbursement Strategic Consulting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Player, Chasity R., , ,</b>		Date of Disbursement MM / DD / YYYY 11 / 15 / 2024	
Mailing Address 227 Cork Alley		FEC Identification Number C [ ] <b>Transaction ID : SB21B.45395</b> Amount of Each Disbursement this Period [ ] 225.00	
City Madison	State AL	Zip Code 35758	Category/ Type [ ]
Purpose of Disbursement Strategic Consulting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 600.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Polarouthu, Nandini, , ,**

Mailing Address 966 Astoria Dr.

City  
Sunnyvale

State  
CA

Zip Code  
94087

Purpose of Disbursement

Strategic Consulting

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY  
10 / 29 / 2024

FEC Identification Number

C

Transaction ID : SB21B.45396

Amount of Each Disbursement this Period

150.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Polarouthu, Nandini, , ,**

Mailing Address 966 Astoria Dr.

City  
Sunnyvale

State  
CA

Zip Code  
94087

Purpose of Disbursement

Strategic Consulting

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY  
11 / 15 / 2024

FEC Identification Number

C

Transaction ID : SB21B.45397

Amount of Each Disbursement this Period

225.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Pollack, Justin A, , ,**

Mailing Address 42 Climbing Vine

City  
Irvine

State  
CA

Zip Code  
92603

Purpose of Disbursement

Strategic Consulting

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY  
10 / 29 / 2024

FEC Identification Number

C

Transaction ID : SB21B.45398

Amount of Each Disbursement this Period

150.00

Memo Item

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

525.00

**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)

Form for line numbers 21b-30b with checkboxes. 21b is checked.

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)
YOUTH PROGRESSIVE ACTION CATALYST

Form A: Pollack, Justin A. Disbursement details including date (11/15/2024), amount (225.00), and transaction ID (SB21B.45399).

Form B: Purnell, Brock J. Disbursement details including date (10/29/2024), amount (150.00), and transaction ID (SB21B.45400).

Form C: Purnell, Brock J. Disbursement details including date (11/15/2024), amount (225.00), and transaction ID (SB21B.45401).

SUBTOTAL of Disbursements This Page (optional) 600.00
TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Pyarali, Hasan, , ,**

Mailing Address 4290 Brighton Blvd.  
Apt 522

City  
Denver

State  
CO

Zip Code  
80216

Purpose of Disbursement  
Strategic Consulting

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			29			2024			

FEC Identification Number

C

**Transaction ID : SB21B.45402**

Amount of Each Disbursement this Period

150.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Pyarali, Hasan, , ,**

Mailing Address 4290 Brighton Blvd.  
Apt 522

City  
Denver

State  
CO

Zip Code  
80216

Purpose of Disbursement  
Strategic Consulting

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify)

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2024			

FEC Identification Number

C

**Transaction ID : SB21B.45403**

Amount of Each Disbursement this Period

75.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Rabinowitz, Rahul, , ,**

Mailing Address 1 Fullerton Road

City  
Moorestown

State  
NJ

Zip Code  
08057

Purpose of Disbursement  
Strategic Consulting

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			29			2024			

FEC Identification Number

C

**Transaction ID : SB21B.45404**

Amount of Each Disbursement this Period

150.00

Memo Item

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

375.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

## YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial)

**A. Rabinowitz, Rahul, , ,**

Mailing Address 1 Fullerton Road

City  
Moorestown

State  
NJ

Zip Code  
08057

Purpose of Disbursement

Strategic Consulting

Candidate Name

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	5		2	0	2	4

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB21B.45405**

Amount of Each Disbursement this Period

[Redacted]	225.00
------------	--------

Memo Item

Full Name (Last, First, Middle Initial)

**B. Ramesh, Ashva, , ,**

Mailing Address 2144 North Beaver Creek Drive

City  
Vernon Hills

State  
IL

Zip Code  
60061

Purpose of Disbursement

Strategic Consulting

Candidate Name

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	9		2	0	2	4

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB21B.45406**

Amount of Each Disbursement this Period

[Redacted]	150.00
------------	--------

Memo Item

Full Name (Last, First, Middle Initial)

**C. Ramesh, Ashva, , ,**

Mailing Address 2144 North Beaver Creek Drive

City  
Vernon Hills

State  
IL

Zip Code  
60061

Purpose of Disbursement

Strategic Consulting

Candidate Name

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	5		2	0	2	4

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB21B.45407**

Amount of Each Disbursement this Period

[Redacted]	225.00
------------	--------

Memo Item

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

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

[Redacted]	600.00
------------	--------

[Redacted]	
------------	--

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Ratner, Dimitri, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 37 Hunting Hill Rd.

City Woodbridge State CT Zip Code 06525

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 29 / 2024

FEC Identification Number: C

Transaction ID : SB21B.45408

Amount of Each Disbursement this Period: 150.00

Memo Item

**B. Ratner, Dimitri, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 37 Hunting Hill Rd.

City Woodbridge State CT Zip Code 06525

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 15 / 2024

FEC Identification Number: C

Transaction ID : SB21B.45409

Amount of Each Disbursement this Period: 150.00

Memo Item

**C. Razmjoo, Evan, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 15 Coastal Oak

City Newport Coast State CA Zip Code 92657

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 29 / 2024

FEC Identification Number: C

Transaction ID : SB21B.45411

Amount of Each Disbursement this Period: 150.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 450.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial) <b>A. Razmjoo, Evan, , ,</b>		Date of Disbursement MM / DD / YYYY 11 / 15 / 2024	
Mailing Address 15 Coastal Oak		FEC Identification Number C [ ] <b>Transaction ID : SB21B.45411</b> Amount of Each Disbursement this Period [ ] 225.00	
City Newport Coast	State CA	Zip Code 92657	Category/ Type [ ]
Purpose of Disbursement Strategic Consulting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Reyes, Diana, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 29 / 2024	
Mailing Address 3028 Brighton 4th Street Apt.1		FEC Identification Number C [ ] <b>Transaction ID : SB21B.45412</b> Amount of Each Disbursement this Period [ ] 150.00	
City Brooklyn	State NY	Zip Code 11235	Category/ Type [ ]
Purpose of Disbursement Strategic Consulting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Reyes, Diana, , ,</b>		Date of Disbursement MM / DD / YYYY 11 / 15 / 2024	
Mailing Address 3028 Brighton 4th Street Apt.1		FEC Identification Number C [ ] <b>Transaction ID : SB21B.45413</b> Amount of Each Disbursement this Period [ ] 225.00	
City Brooklyn	State NY	Zip Code 11235	Category/ Type [ ]
Purpose of Disbursement Strategic Consulting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 600.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial) <b>A. Riley, Katelin, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 29 / 2024
Mailing Address 7582 Seabluff Drive Unit #105		FEC Identification Number <b>C</b> <b>Transaction ID : SB21B.45414</b> Amount of Each Disbursement this Period 150.00
City Huntington Beach	State CA	
Purpose of Disbursement Strategic Consulting		Memo Item <input type="checkbox"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Riley, Katelin, , ,</b>		Date of Disbursement MM / DD / YYYY 11 / 15 / 2024
Mailing Address 7582 Seabluff Drive Unit #105		FEC Identification Number <b>C</b> <b>Transaction ID : SB21B.45415</b> Amount of Each Disbursement this Period 225.00
City Huntington Beach	State CA	
Purpose of Disbursement Strategic Consulting		Memo Item <input type="checkbox"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Roman, Natalia T., , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 29 / 2024
Mailing Address 7225 Excelsior Dr.		FEC Identification Number <b>C</b> <b>Transaction ID : SB21B.45416</b> Amount of Each Disbursement this Period 150.00
City Eastvale	State CA	
Purpose of Disbursement Strategic Consulting		Memo Item <input type="checkbox"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	525.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Roman, Natalia T., , ,**

Mailing Address 7225 Excelsior Dr.

City  
Eastvale

State  
CA

Zip Code  
92880

Purpose of Disbursement

Strategic Consulting

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
11			15			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45417**

Amount of Each Disbursement this Period

225.00
--------

Memo Item

Full Name (Last, First, Middle Initial)

**B. Roosters Catering**

Mailing Address 4023 N. 42nd St

City  
Omaha

State  
NE

Zip Code  
68111

Purpose of Disbursement

Catering

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
10			21			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45150**

Amount of Each Disbursement this Period

394.20
--------

Memo Item

Full Name (Last, First, Middle Initial)

**C. Sabir, Ali, , ,**

Mailing Address 116 Fellswood Drive

City  
Moorestown

State  
NJ

Zip Code  
08057

Purpose of Disbursement

Strategic Consulting

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
10			29			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45418**

Amount of Each Disbursement this Period

150.00
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Memo Item

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

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

769.20
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Sabir, Ali, , ,**

Mailing Address 116 Fellswood Drive

City  
Moorestown

State  
NJ

Zip Code  
08057

Purpose of Disbursement

Strategic Consulting

Candidate Name

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	5		2	0	2	4

FEC Identification Number

**C**

**Transaction ID : SB21B.45419**

Amount of Each Disbursement this Period

225.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Sandler, Reiff, Lamb, Rosenstein & Birkenstock, PC**

Mailing Address 1620 Eye St. NW  
Suite 900

City  
Washington

State  
DC

Zip Code  
20006

Purpose of Disbursement

Legal Services

Candidate Name

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	5		2	0	2	4

FEC Identification Number

**C**

**Transaction ID : SB21B.45187**

Amount of Each Disbursement this Period

480.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Sandler, Reiff, Lamb, Rosenstein & Birkenstock, PC**

Mailing Address 1620 Eye St. NW  
Suite 900

City  
Washington

State  
DC

Zip Code  
20006

Purpose of Disbursement

Legal Services

Candidate Name

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	8		2	0	2	4

FEC Identification Number

**C**

**Transaction ID : SB21B.45805**

Amount of Each Disbursement this Period

1295.00

Memo Item

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

2000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Sarabia, Daniela, , ,**

Mailing Address 3012 Dearborn Ave

City  
Palmdale

State  
CA

Zip Code  
93551

Purpose of Disbursement

Strategic Consulting

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
10			29			2024			

FEC Identification Number

C

**Transaction ID : SB21B.45420**

Amount of Each Disbursement this Period

150.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Sarabia, Daniela, , ,**

Mailing Address 3012 Dearborn Ave

City  
Palmdale

State  
CA

Zip Code  
93551

Purpose of Disbursement

Strategic Consulting

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
11			15			2024			

FEC Identification Number

C

**Transaction ID : SB21B.45421**

Amount of Each Disbursement this Period

150.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Schnieders, Anna C., , ,**

Mailing Address 1065 Lexington Avenue  
Apt 8B

City  
New York

State  
NY

Zip Code  
10021

Purpose of Disbursement

Strategic Consulting

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
10			29			2024			

FEC Identification Number

C

**Transaction ID : SB21B.45422**

Amount of Each Disbursement this Period

150.00

Memo Item

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

450.00

**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)

Form for line numbers 21b-30b with checkboxes. 21b is checked.

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

Form A: Schnieders, Anna C., , ,
Mailing Address: 1065 Lexington Avenue Apt 8B
City: New York, State: NY, Zip Code: 10021
Purpose of Disbursement: Strategic Consulting
Candidate Name:
Office Sought: House, Senate, President
Disbursement For: Primary, General, Other (specify)
Amount of Each Disbursement this Period: 225.00

Form B: Searcy, Ananda D., , ,
Mailing Address: 1528 Franklin St. 4
City: Santa Monica, State: CA, Zip Code: 90404
Purpose of Disbursement: Strategic Consulting
Candidate Name:
Office Sought: House, Senate, President
Disbursement For: Primary, General, Other (specify)
Amount of Each Disbursement this Period: 150.00

Form C: Searcy, Ananda D., , ,
Mailing Address: 1528 Franklin St. 4
City: Santa Monica, State: CA, Zip Code: 90404
Purpose of Disbursement: Strategic Consulting
Candidate Name:
Office Sought: House, Senate, President
Disbursement For: Primary, General, Other (specify)
Amount of Each Disbursement this Period: 225.00

SUBTOTAL of Disbursements This Page (optional)..... 600.00
TOTAL This Period (last page this line number only).....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Seeman, Anne R., , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 4309 Shadyglade Ave

City Studio City State CA Zip Code 91604

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 15 / 2024

FEC Identification Number: C

Transaction ID : SB21B.45428

Amount of Each Disbursement this Period: 225.00

Memo Item

**B. Selman, Elana B., , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 51 Falmouth Road Apt. #2

City West Newton State MA Zip Code 02465

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 29 / 2024

FEC Identification Number: C

Transaction ID : SB21B.45429

Amount of Each Disbursement this Period: 150.00

Memo Item

**C. Selman, Elana B., , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 51 Falmouth Road Apt. #2

City West Newton State MA Zip Code 02465

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 15 / 2024

FEC Identification Number: C

Transaction ID : SB21B.4543t

Amount of Each Disbursement this Period: 225.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 600.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Senate, Madeline, , ,**

Mailing Address 804 Devon Lane

City Branchburg

State NJ

Zip Code 08853

Purpose of Disbursement

Strategic Consulting

Candidate Name

Category/Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY  
11 / 15 / 2024

FEC Identification Number

C

Transaction ID : SB21B.45483

Amount of Each Disbursement this Period

225.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Shahnawaz, Samiha, , ,**

Mailing Address 4508 Locust Street

City Philadelphia

State PA

Zip Code 19139

Purpose of Disbursement

Strategic Consulting

Candidate Name

Category/Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY  
10 / 29 / 2024

FEC Identification Number

C

Transaction ID : SB21B.45431

Amount of Each Disbursement this Period

150.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Shahnawaz, Samiha, , ,**

Mailing Address 4508 Locust Street

City Philadelphia

State PA

Zip Code 19139

Purpose of Disbursement

Strategic Consulting

Candidate Name

Category/Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY  
10 / 29 / 2024

FEC Identification Number

C

Transaction ID : SB21B.45431

Amount of Each Disbursement this Period

150.00

Memo Item

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

525.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Shahnawaz, Samiha, , ,**

Mailing Address 4508 Locust Street

City Philadelphia

State PA

Zip Code 19139

Purpose of Disbursement  
Strategic Consulting

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
11			15			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45433**

Amount of Each Disbursement this Period

225.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Shahnawaz, Samiha, , ,**

Mailing Address 4508 Locust Street

City Philadelphia

State PA

Zip Code 19139

Purpose of Disbursement  
Strategic Consulting

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
11			15			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45434**

Amount of Each Disbursement this Period

150.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Sherwood, Nicholas E., , ,**

Mailing Address 3630 Westminster Ave.  
Unit 321

City Santa Ana

State CA

Zip Code 92703

Purpose of Disbursement  
Strategic Consulting

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
10			29			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45435**

Amount of Each Disbursement this Period

150.00

Memo Item

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

525.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Sherwood, Nicholas E., , ,**

Mailing Address 3630 Westminster Ave.  
Unit 321

City  
Santa Ana

State  
CA

Zip Code  
92703

Purpose of Disbursement

Strategic Consulting

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
11			15			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45436**

Amount of Each Disbursement this Period

225.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Singh, Jessica P., , ,**

Mailing Address 4815 Pennel Ct

City  
Stockton

State  
CA

Zip Code  
95206

Purpose of Disbursement

Strategic Consulting

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
10			29			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45437**

Amount of Each Disbursement this Period

150.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Singh, Jessica P., , ,**

Mailing Address 4815 Pennel Ct

City  
Stockton

State  
CA

Zip Code  
95206

Purpose of Disbursement

Strategic Consulting

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
11			15			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45438**

Amount of Each Disbursement this Period

225.00

Memo Item

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

600.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Smialek, William, , ,**

Mailing Address 1201 Mass Ave  
267 Adams Mail Center

City Cambridge State MA Zip Code 02138

Purpose of Disbursement

Travel Reimbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			23			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45158**

Amount of Each Disbursement this Period

1750.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Spirit Airlines**

Mailing Address 2800 Executive Way

City Miramar State FL Zip Code 33025

Purpose of Disbursement

Travel

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			23			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45158**

Amount of Each Disbursement this Period

762.90

Memo Item

Full Name (Last, First, Middle Initial)

**C. Frontier Airlines**

Mailing Address 4545 Airport Way

City Denver State CO Zip Code 80239

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			23			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45158**

Amount of Each Disbursement this Period

854.00

Memo Item

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

1750.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Solis, Isabella E., , ,**

Mailing Address 24843 Paseo del Rancho

City  
Calabasas

State  
CA

Zip Code  
91302

Purpose of Disbursement

Strategic Consulting

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
10			29			2024			

FEC Identification Number

C

**Transaction ID : SB21B.45439**

Amount of Each Disbursement this Period

150.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Solis, Isabella E., , ,**

Mailing Address 24843 Paseo del Rancho

City  
Calabasas

State  
CA

Zip Code  
91302

Purpose of Disbursement

Strategic Consulting

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
11			15			2024			

FEC Identification Number

C

**Transaction ID : SB21B.45440**

Amount of Each Disbursement this Period

225.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Stephenson, Mariah T., , ,**

Mailing Address 201 Leonard Lane

City  
Midwest City

State  
OK

Zip Code  
73110

Purpose of Disbursement

Strategic Consulting

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
10			29			2024			

FEC Identification Number

C

**Transaction ID : SB21B.45441**

Amount of Each Disbursement this Period

150.00

Memo Item

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

525.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial) <b>A. Stephenson, Mariah T., , ,</b>		Date of Disbursement MM / DD / YYYY 11 / 15 / 2024	
Mailing Address 201 Leonard Lane		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.45442</b> Amount of Each Disbursement this Period [REDACTED] 225.00	
City Midwest City	State OK	Zip Code 73110	Category/ Type [REDACTED]
Purpose of Disbursement Strategic Consulting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>B. Strategy &amp; Hustle LLC</b>		Date of Disbursement MM / DD / YYYY 11 / 04 / 2024	
Mailing Address 3216 Central Ave NE		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.45494</b> Amount of Each Disbursement this Period [REDACTED] 5000.00	
City Washington	State DC	Zip Code 20018	Category/ Type [REDACTED]
Purpose of Disbursement Strategic Consulting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>C. Teague, Brandon H., , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 29 / 2024	
Mailing Address 9 Pop Munday Lane		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.45443</b> Amount of Each Disbursement this Period [REDACTED] 150.00	
City Taylorsville	State NC	Zip Code 28681	Category/ Type [REDACTED]
Purpose of Disbursement Strategic Consulting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: _____	District: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 5375.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Teague, Brandon H., , ,**

Mailing Address 9 Pop Munday Lane

City  
Taylorsville

State  
NC

Zip Code  
28681

Purpose of Disbursement

Strategic Consulting

Candidate Name

Office Sought:

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

Disbursement For:

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	5		2	0	2	4

FEC Identification Number

**C**

**Transaction ID : SB21B.45444**

Amount of Each Disbursement this Period

225.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Teague, Brandon H., , ,**

Mailing Address 9 Pop Munday Lane

City  
Taylorsville

State  
NC

Zip Code  
28681

Purpose of Disbursement

Strategic Consulting

Candidate Name

Office Sought:

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

Disbursement For:

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	1		2	0	2	4

FEC Identification Number

**C**

**Transaction ID : SB21B.45775**

Amount of Each Disbursement this Period

5.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Thomas, Taryn D., , ,**

Mailing Address 315 Hillcrest Blvd. #5  
Apt No. 5

City  
Inglewood

State  
CA

Zip Code  
90301

Purpose of Disbursement

Strategic Consulting

Candidate Name

Office Sought:

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

Disbursement For:

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	9		2	0	2	4

FEC Identification Number

**C**

**Transaction ID : SB21B.45444**

Amount of Each Disbursement this Period

150.00

Memo Item

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

380.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Thomas, Taryn D., , ,**

Mailing Address 315 Hillcrest Blvd. #5  
Apt No. 5

City  
Inglewood

State  
CA

Zip Code  
90301

Purpose of Disbursement

Strategic Consulting

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
1	1		1	5		2	0	2	4

FEC Identification Number

**C**

**Transaction ID : SB21B.45446**

Amount of Each Disbursement this Period

150.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Tobin, Ella, , ,**

Mailing Address 509 W Blaine St.

City  
Seattle

State  
WA

Zip Code  
98119

Purpose of Disbursement

Strategic Consulting

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
1	0		2	9		2	0	2	4

FEC Identification Number

**C**

**Transaction ID : SB21B.45447**

Amount of Each Disbursement this Period

150.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Tobin, Ella, , ,**

Mailing Address 509 W Blaine St.

City  
Seattle

State  
WA

Zip Code  
98119

Purpose of Disbursement

Strategic Consulting

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
1	1		1	5		2	0	2	4

FEC Identification Number

**C**

**Transaction ID : SB21B.45448**

Amount of Each Disbursement this Period

225.00

Memo Item

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

525.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Tran, Derek, , ,**

Mailing Address 8056 Camino Kiosco

City  
San Diego

State  
CA

Zip Code  
92122

Purpose of Disbursement

Strategic Consulting

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
10			29			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45449**

Amount of Each Disbursement this Period

150.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Tran, Derek, , ,**

Mailing Address 8056 Camino Kiosco

City  
San Diego

State  
CA

Zip Code  
92122

Purpose of Disbursement

Strategic Consulting

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
11			15			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45450**

Amount of Each Disbursement this Period

225.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Tripicco, Brooke A., , ,**

Mailing Address 169 Mountain Drive

City  
Pittsfield

State  
MA

Zip Code  
01201

Purpose of Disbursement

Strategic Consulting

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
10			29			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45451**

Amount of Each Disbursement this Period

150.00

Memo Item

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

525.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Tripicco, Brooke A., , ,**

Mailing Address 169 Mountain Drive

City  
Pittsfield

State  
MA

Zip Code  
01201

Purpose of Disbursement

Strategic Consulting

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
11			15			2024			

FEC Identification Number

C [ ]

Transaction ID : SB21B.45452

Amount of Each Disbursement this Period

[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
									225.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Twilio**

Mailing Address 101 Spear Street  
Fifth Floor

City  
San Francisco

State  
CA

Zip Code  
94105

Purpose of Disbursement

Software

Candidate Name

Category/  
Type

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			07			2024			

FEC Identification Number

C [ ]

Transaction ID : SB21B.45495

Amount of Each Disbursement this Period

[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
									19.95

Memo Item

Full Name (Last, First, Middle Initial)

**C. Valdez Monroy, Jacqueline, , ,**

Mailing Address 7428 Kraft Avenue

City  
North Hollywood

State  
CA

Zip Code  
91605

Purpose of Disbursement

Strategic Consulting

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
10			29			2024			

FEC Identification Number

C [ ]

Transaction ID : SB21B.45453

Amount of Each Disbursement this Period

[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
									150.00

Memo Item

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

[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
									394.95

**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)

Form for line numbers 21b-30b with checkboxes. 21b is checked.

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

Form A: Valdez Monroy, Jacqueline, , ,
Mailing Address 7428 Kraft Avenue
City North Hollywood, State CA, Zip Code 91605
Purpose of Disbursement Strategic Consulting
Candidate Name
Office Sought: House, Senate, President
Disbursement For: Primary, General, Other (specify)
State: District:
Date of Disbursement: 11 / 15 / 2024
FEC Identification Number: C
Transaction ID: SB21B.45454
Amount of Each Disbursement this Period: 225.00
Memo Item: [ ]

Form B: Vallecillo, Marissa, , ,
Mailing Address 3338 Cherry Ln
City Bellevue, State NE, Zip Code 68147
Purpose of Disbursement Event Organizing Services
Candidate Name
Office Sought: House, Senate, President
Disbursement For: Primary, General, Other (specify)
State: District:
Date of Disbursement: 10 / 21 / 2024
FEC Identification Number: C
Transaction ID: SB21B.45148
Amount of Each Disbursement this Period: 211.20
Memo Item: [ ]

Form C: Vasiloglou, Ismini K., , ,
Mailing Address 1938 Volberg str.
City Atlanta, State GA, Zip Code 30318
Purpose of Disbursement Strategic Consulting
Candidate Name
Office Sought: House, Senate, President
Disbursement For: Primary, General, Other (specify)
State: District:
Date of Disbursement: 10 / 29 / 2024
FEC Identification Number: C
Transaction ID: SB21B.45454
Amount of Each Disbursement this Period: 150.00
Memo Item: [ ]

SUBTOTAL of Disbursements This Page (optional)..... 586.20
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)

Form for line numbers 21b-30b with checkboxes. 21b is checked.

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

Form A: Vasiloglou, Ismini K., , , Disbursement details including date (11/15/2024), amount (225.00), and FEC ID.

Form B: Vengrin, Charlotte, , , Disbursement details including date (10/29/2024), amount (150.00), and FEC ID.

Form C: Vengrin, Charlotte, , , Disbursement details including date (11/15/2024), amount (225.00), and FEC ID.

SUBTOTAL of Disbursements This Page (optional) 600.00
TOTAL This Period (last page this line number only)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Vig, Rohan, , ,**

Mailing Address 1331 Flamingo Drive

City  
Corona

State  
CA

Zip Code  
92879

Purpose of Disbursement

Strategic Consulting

Candidate Name

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	5		2	0	2	4

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB21B.45486**

Amount of Each Disbursement this Period

[Redacted]	225.00
------------	--------

Memo Item

Full Name (Last, First, Middle Initial)

**B. Walker, Star K., , ,**

Mailing Address 2501 Westridge St.  
Apt 239

City  
Houston

State  
TX

Zip Code  
77054

Purpose of Disbursement

Strategic Consulting

Candidate Name

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	9		2	0	2	4

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB21B.45459**

Amount of Each Disbursement this Period

[Redacted]	150.00
------------	--------

Memo Item

Full Name (Last, First, Middle Initial)

**C. Walker, Star K., , ,**

Mailing Address 2501 Westridge St.  
Apt 239

City  
Houston

State  
TX

Zip Code  
77054

Purpose of Disbursement

Strategic Consulting

Candidate Name

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	5		2	0	2	4

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB21B.45466**

Amount of Each Disbursement this Period

[Redacted]	225.00
------------	--------

Memo Item

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

[Redacted]	600.00
------------	--------

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

[Redacted]	
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Waram, Mintra, , ,**

Mailing Address 8072 E Mercer Ln.

City  
Scottsdale

State  
AZ

Zip Code  
85260

Purpose of Disbursement

Strategic Consulting

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
10			29			2024			

FEC Identification Number

C [ ]

**Transaction ID : SB21B.45461**

Amount of Each Disbursement this Period

155.00
--------

Memo Item

Full Name (Last, First, Middle Initial)

**B. Waram, Mintra, , ,**

Mailing Address 8072 E Mercer Ln.

City  
Scottsdale

State  
AZ

Zip Code  
85260

Purpose of Disbursement

Strategic Consulting

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
11			15			2024			

FEC Identification Number

C [ ]

**Transaction ID : SB21B.45462**

Amount of Each Disbursement this Period

225.00
--------

Memo Item

Full Name (Last, First, Middle Initial)

**C. Watkins, Serena R., , ,**

Mailing Address 765 Vandal Way

City  
Palmdale

State  
CA

Zip Code  
93551

Purpose of Disbursement

Strategic Consulting

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
10			29			2024			

FEC Identification Number

C [ ]

**Transaction ID : SB21B.45463**

Amount of Each Disbursement this Period

150.00
--------

Memo Item

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

530.00
--------

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

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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Watkins, Serena R., , ,**

Mailing Address 765 Vandal Way

City  
Palmdale

State  
CA

Zip Code  
93551

Purpose of Disbursement

Strategic Consulting

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
11			15			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45464**

Amount of Each Disbursement this Period

150.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Williams, Alexandria, , ,**

Mailing Address 713 North Hickory

City  
North Little Rock

State  
AR

Zip Code  
72114

Purpose of Disbursement

Strategic Consulting

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
10			29			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45465**

Amount of Each Disbursement this Period

150.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Williams, Alexandria, , ,**

Mailing Address 713 North Hickory

City  
North Little Rock

State  
AR

Zip Code  
72114

Purpose of Disbursement

Strategic Consulting

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
11			15			2024			

FEC Identification Number

**C**

**Transaction ID : SB21B.45466**

Amount of Each Disbursement this Period

150.00

Memo Item

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

450.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Wolmetz, Jacob R., , ,**

Mailing Address 57 Valleywood Road

City  
Commack

State  
NY

Zip Code  
11725

Purpose of Disbursement

Strategic Consulting

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY  
10 / 29 / 2024

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.45467**

Amount of Each Disbursement this Period

[ ] 150.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Wolmetz, Jacob R., , ,**

Mailing Address 57 Valleywood Road

City  
Commack

State  
NY

Zip Code  
11725

Purpose of Disbursement

Strategic Consulting

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY  
11 / 15 / 2024

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.45468**

Amount of Each Disbursement this Period

[ ] 225.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Wright, Isabella E., , ,**

Mailing Address 9212 Sherry Circle

City  
Huntington Beach

State  
CA

Zip Code  
92646

Purpose of Disbursement

Strategic Consulting

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY  
10 / 29 / 2024

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.45466**

Amount of Each Disbursement this Period

[ ] 150.00

Memo Item

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

[ ] 525.00

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

[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

## YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial)

**A. Wright, Isabella E., , ,**

Mailing Address 9212 Sherry Circle

City  
Huntington Beach

State  
CA

Zip Code  
92646

Purpose of Disbursement

Strategic Consulting

Candidate Name

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	5		2	0	2	4

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB21B.45470**

Amount of Each Disbursement this Period

[Redacted]	225.00
------------	--------

Memo Item

Full Name (Last, First, Middle Initial)

**B. Wu, Fengxue, , ,**

Mailing Address 2878 Pecan Ct.

City  
Pomona

State  
CA

Zip Code  
91767

Purpose of Disbursement

Strategic Consulting

Candidate Name

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	9		2	0	2	4

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB21B.45471**

Amount of Each Disbursement this Period

[Redacted]	150.00
------------	--------

Memo Item

Full Name (Last, First, Middle Initial)

**C. Wu, Fengxue, , ,**

Mailing Address 2878 Pecan Ct.

City  
Pomona

State  
CA

Zip Code  
91767

Purpose of Disbursement

Strategic Consulting

Candidate Name

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	5		2	0	2	4

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB21B.45472**

Amount of Each Disbursement this Period

[Redacted]	225.00
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Memo Item

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

[Redacted]	600.00
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**TOTAL** This Period (last page this line number only)..... ▶

[Redacted]	
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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Wynner, Annie, , ,**

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM / DD / YYYY  
10 / 29 / 2024

Mailing Address: 2216 Channing Way Apt 1

City: Berkeley State: CA Zip Code: 94704

Purpose of Disbursement: Strategic Consulting

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

FEC Identification Number: **C** \_\_\_\_\_

Transaction ID : **SB21B.45473**

Amount of Each Disbursement this Period: \_\_\_\_\_ 150.00

Memo Item

**B. Wynner, Annie, , ,**

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM / DD / YYYY  
11 / 15 / 2024

Mailing Address: 2216 Channing Way Apt 1

City: Berkeley State: CA Zip Code: 94704

Purpose of Disbursement: Strategic Consulting

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

FEC Identification Number: **C** \_\_\_\_\_

Transaction ID : **SB21B.45474**

Amount of Each Disbursement this Period: \_\_\_\_\_ 75.00

Memo Item

**C. Yang, Amaris, , ,**

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM / DD / YYYY  
10 / 29 / 2024

Mailing Address: 2033 Legacy Ln.

City: Chino Hills State: CA Zip Code: 91709

Purpose of Disbursement: Strategic Consulting

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

FEC Identification Number: **C** \_\_\_\_\_

Transaction ID : **SB21B.45475**

Amount of Each Disbursement this Period: \_\_\_\_\_ 150.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ \_\_\_\_\_ 375.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Yang, Amaris, , ,**

Mailing Address 2033 Legacy Ln.

City  
Chino Hills

State  
CA

Zip Code  
91709

Purpose of Disbursement

Strategic Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2024			

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB21B.45476**

Amount of Each Disbursement this Period

[Redacted]	75.00
------------	-------

Memo Item

Full Name (Last, First, Middle Initial)

**B. Young, Nicole C., , ,**

Mailing Address 141 E. College Ave.  
Box #531

City  
Decatur

State  
GA

Zip Code  
30030

Purpose of Disbursement

Strategic Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			29			2024			

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB21B.45477**

Amount of Each Disbursement this Period

[Redacted]	150.00
------------	--------

Memo Item

Full Name (Last, First, Middle Initial)

**C. Young, Nicole C., , ,**

Mailing Address 141 E. College Ave.  
Box #531

City  
Decatur

State  
GA

Zip Code  
30030

Purpose of Disbursement

Strategic Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2024			

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB21B.45478**

Amount of Each Disbursement this Period

[Redacted]	225.00
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Memo Item

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

[Redacted]	450.00
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**TOTAL** This Period (last page this line number only)..... ▶

[Redacted]	
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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial) <b>A. Zeng, Wendy, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 29 / 2024	
Mailing Address 2002 Addison Street		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.45479</b> Amount of Each Disbursement this Period [REDACTED] 150.00	
City Berkeley	State CA	Zip Code 94704	Category/ Type [REDACTED]
Purpose of Disbursement Strategic Consulting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Zeng, Wendy, , ,</b>		Date of Disbursement MM / DD / YYYY 11 / 15 / 2024	
Mailing Address 2002 Addison Street		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.45480</b> Amount of Each Disbursement this Period [REDACTED] 225.00	
City Berkeley	State CA	Zip Code 94704	Category/ Type [REDACTED]
Purpose of Disbursement Strategic Consulting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Zeng, Wendy, , ,</b>		Date of Disbursement MM / DD / YYYY 11 / 21 / 2024	
Mailing Address 2002 Addison Street		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.4577:</b> Amount of Each Disbursement this Period [REDACTED] 5.00	
City Berkeley	State CA	Zip Code 94704	Category/ Type [REDACTED]
Purpose of Disbursement Strategic Consulting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 380.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED] 67552.29

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Adhikari, Maya, , ,**

Full Name (Last, First, Middle Initial)

Date of Disbursement:  /  /

Mailing Address: 9 Sunset Boulevard  
9 Sunset Boulevard

City: Houston State: TX Zip Code: 77005

Purpose of Disbursement: Ballot Curing - In-Kind

Candidate Name: GALLEGO, RUBEN, , ,

Office Sought:  House  Senate  President

Disbursement For: 2024  Primary  General  Other (specify) ▼

State: AZ District: 00

FEC Identification Number: **C** S4AZ00139  
**Transaction ID : SB23.45581**  
Amount of Each Disbursement this Period:   
 Memo Item

**B. Aggarwal, amiya, , ,**

Full Name (Last, First, Middle Initial)

Date of Disbursement:  /  /

Mailing Address: 12525 E Altadena Ave.

City: Scottsdale State: AZ Zip Code: 85259

Purpose of Disbursement: Ballot Curing - In-Kind

Candidate Name: DCCC

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

FEC Identification Number: **C** C00000935  
**Transaction ID : SB23.45740**  
Amount of Each Disbursement this Period:   
 Memo Item

**C. AIShehab, Ali, , ,**

Full Name (Last, First, Middle Initial)

Date of Disbursement:  /  /

Mailing Address: 2754 Chaddsford Circle  
Apt 104

City: Oviedo State: FL Zip Code: 32765

Purpose of Disbursement: Ballot Curing - In-Kind

Candidate Name: DCCC

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

FEC Identification Number: **C** C00000935  
**Transaction ID : SB23.45735**  
Amount of Each Disbursement this Period:   
 Memo Item

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

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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)  
**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial) <b>A. Alvarez, Scarlett A., , ,</b>			Date of Disbursement MM / DD / YYYY <b>10 / 28 / 2024</b>	
Mailing Address <b>3227 East Avenue S-1</b>				
City <b>Palmdale</b>	State <b>CA</b>	Zip Code <b>93550</b>	FEC Identification Number <b>C H4CA27111</b> <b>Transaction ID : SB23.45197</b>	
Purpose of Disbursement <b>In-Kind - Canvassing Stipend</b>			Amount of Each Disbursement this Period <b>50.00</b>	
Candidate Name <b>WHITESIDES, GEORGE, , ,</b>			Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2024</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State: <b>CA</b>	District: <b>27</b>			

Full Name (Last, First, Middle Initial) <b>B. Andris, Talia, , ,</b>			Date of Disbursement MM / DD / YYYY <b>11 / 13 / 2024</b>	
Mailing Address <b>6340 Main St</b>				
City <b>Houston</b>	State <b>TX</b>	Zip Code <b>77005</b>	FEC Identification Number <b>C H4CA27111</b> <b>Transaction ID : SB23.45599</b>	
Purpose of Disbursement <b>Ballot Curing - In-Kind</b>			Amount of Each Disbursement this Period <b>40.00</b>	
Candidate Name <b>WHITESIDES, GEORGE, , ,</b>			Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2024</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State: <b>CA</b>	District: <b>27</b>			

Full Name (Last, First, Middle Initial) <b>C. Anyaegbunam, Regina U., , ,</b>			Date of Disbursement MM / DD / YYYY <b>11 / 13 / 2024</b>	
Mailing Address <b>6320 Main Street</b>				
City <b>Houston</b>	State <b>TX</b>	Zip Code <b>77005</b>	FEC Identification Number <b>C S4AZ00139</b> <b>Transaction ID : SB23.45521</b>	
Purpose of Disbursement <b>Ballot Curing - In-Kind</b>			Amount of Each Disbursement this Period <b>40.00</b>	
Candidate Name <b>GALLEGO, RUBEN, , ,</b>			Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2024</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item	
State: <b>AZ</b>	District: <b>00</b>			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	<b>130.00</b>
<b>TOTAL</b> 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)

Form for line numbers 21b-30b with checkboxes, where 23 is checked.

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)
YOUTH PROGRESSIVE ACTION CATALYST

Form A: Anyaegbunam, Regina U., , ,
Mailing Address 6320 Main Street
City Houston, State TX, Zip Code 77005
Purpose of Disbursement: Ballot Curing - In-Kind
Candidate Name: GALLEGO, RUBEN, , ,
Office Sought: Senate
Disbursement For: 2024
FEC Identification Number: C S4AZ00139
Transaction ID: SB23.45699
Amount of Each Disbursement this Period: 60.00

Form B: Aravindan, Lakshmi, , ,
Mailing Address 6310 Main Street
City Houston, State TX, Zip Code 77005
Purpose of Disbursement: Ballot Curing - In-Kind
Candidate Name: WHITESIDES, GEORGE, , ,
Office Sought: House
Disbursement For: 2024
FEC Identification Number: C H4CA27111
Transaction ID: SB23.45597
Amount of Each Disbursement this Period: 40.00

Form C: Ashraft, Madi, , ,
Mailing Address
City
State
Zip Code
Purpose of Disbursement: Canvassing - In-Kind
Candidate Name: EHASZ, ASHLEY, , ,
Office Sought: House
Disbursement For: 2024
FEC Identification Number: C H2PA01099
Transaction ID: SB23.45167
Amount of Each Disbursement this Period: 150.00

SUBTOTAL of Disbursements This Page (optional)..... 250.00
TOTAL This Period (last page this line number only).....

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Back, Austin, , ,**

Mailing Address 25480 Water Wheel Ct

City  
Menifee

State  
CA

Zip Code  
92584

Purpose of Disbursement  
In-Kind - Canvassing Stipend

Candidate Name

ROLLINS, WILL, , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: CA District: 41

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			28			2024			

FEC Identification Number

**C** H2CA42205

**Transaction ID : SB23.45198**

Amount of Each Disbursement this Period

150.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Balan, George, , ,**

Mailing Address 4 Owl Hill Rd

City  
Orinda

State  
CA

Zip Code  
94563

Purpose of Disbursement  
Ballot Curing - In-Kind

Candidate Name

SWALWELL, ERIC MICHAEL, , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify)

State: CA District: 14

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			18			2024			

FEC Identification Number

**C** H2CA15094

**Transaction ID : SB23.45753**

Amount of Each Disbursement this Period

60.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Barra, Catherine, , ,**

Mailing Address 93 Hillcrest Lane

City  
Peekskill

State  
NY

Zip Code  
10566

Purpose of Disbursement  
Ballot Curing - In-Kind

Candidate Name

TRAN, DEREK, , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: CA District: 45

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			13			2024			

FEC Identification Number

**C** H4CA45170

**Transaction ID : SB23.45629**

Amount of Each Disbursement this Period

100.00

Memo Item

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

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

310.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Berlowe Binder, Rachel, , ,**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			23			2024					

Mailing Address 36 Strawberry St  
Apt 53

City Philadelphia State PA Zip Code 19106

FEC Identification Number

**C** H2PA01099

**Transaction ID : SB23.45165**

Amount of Each Disbursement this Period

150.00

Purpose of Disbursement  
Canvassing - In-Kind

Category/Type

Candidate Name

EHASZ, ASHLEY, , ,

Office Sought:  House  Senate  President

Disbursement For: 2024  Primary  General  Other (specify) ▼

State: PA District: 01

Memo Item

Full Name (Last, First, Middle Initial)

**B. Berry, Olivia, , ,**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			14			2024					

Mailing Address 1315 Lincoln Court Ave NE  
Apartment 1315

City Brookhaven State GA Zip Code 30329

FEC Identification Number

**C** C00000935

**Transaction ID : SB23.45674**

Amount of Each Disbursement this Period

80.00

Purpose of Disbursement  
Ballot Curing - In-Kind

Category/Type

Candidate Name

DCCC

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Memo Item

Full Name (Last, First, Middle Initial)

**C. Brantley, Kyle, , ,**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			14			2024					

Mailing Address 1050 Southern Drive  
203

City Columbia State SC Zip Code 29201

FEC Identification Number

**C** C00000935

**Transaction ID : SB23.45659**

Amount of Each Disbursement this Period

120.00

Purpose of Disbursement  
Ballot Curing - In-Kind

Category/Type

Candidate Name

DCCC

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Memo Item

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

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

350.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Brown, Tobias M., , ,**

Mailing Address 324 Independence Dr

City  
Albany

State  
GA

Zip Code  
31705

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

WHITESIDES, GEORGE, , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: CA District: 27

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			13			2024			

FEC Identification Number

**C** H4CA27111

**Transaction ID : SB23.45501**

Amount of Each Disbursement this Period

200.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. BULLDOG DEMOCRATS**

Mailing Address 206 ELM ST PO#204036

City  
NEW HAVEN

State  
CT

Zip Code  
06520

Purpose of Disbursement

Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			24			2024			

FEC Identification Number

**C** C00419754

**Transaction ID : SB23.45171**

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. BULLDOG DEMOCRATS**

Mailing Address 206 ELM ST PO#204036

City  
NEW HAVEN

State  
CT

Zip Code  
06520

Purpose of Disbursement

Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			28			2024			

FEC Identification Number

**C** C00419754

**Transaction ID : SB23.45199**

Amount of Each Disbursement this Period

1500.00

Memo Item

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

3700.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Cabello, Juan, , ,**

Mailing Address 135 East 1st Street

City  
Stockton

State  
CA

Zip Code  
95206

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

GRAY, ADAM C., , ,

Office Sought:

 House  
 Senate  
 President

Disbursement For: 2024

 Primary  
 General  
 Other (specify) ▼

State: CA

District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	8		2	0	2	4

FEC Identification Number

**C** H2CA13115

**Transaction ID : SB23.45751**

Amount of Each Disbursement this Period

1	2	0	0	0	0	0	0	0	0
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Memo Item

Full Name (Last, First, Middle Initial)

**B. Calito-Cukul, Asholey, , ,**

Mailing Address 5659 Casper St

City  
Detroit

State  
MI

Zip Code  
48210

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

GALLEGO, RUBEN, , ,

Office Sought:

 House  
 Senate  
 President

Disbursement For: 2024

 Primary  
 General  
 Other (specify) ▼

State: AZ

District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	3		2	0	2	4

FEC Identification Number

**C** S4AZ00139

**Transaction ID : SB23.45559**

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0
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Memo Item

Full Name (Last, First, Middle Initial)

**C. Carmona, Anthony, , ,**

Mailing Address 31006 Sedona St.

City  
Lake Elsinore

State  
CA

Zip Code  
92530

Purpose of Disbursement

In-Kind - Canvassing Stipend

Candidate Name

ROLLINS, WILL, , ,

Office Sought:

 House  
 Senate  
 President

Disbursement For: 2024

 Primary  
 General  
 Other (specify) ▼

State: CA

District: 41

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	2	4

FEC Identification Number

**C** H2CA42205

**Transaction ID : SB23.45193**

Amount of Each Disbursement this Period

1	4	0	0	0	0	0	0	0	0
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Memo Item

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

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

2	8	0	0	0	0	0	0	0	0
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2	8	0	0	0	0	0	0	0	0
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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Carmona, Anthony, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 31006 Sedona St.

City Lake Elsinore State CA Zip Code 92530

Purpose of Disbursement  
Ballot Curing - In-Kind

Candidate Name  
ROLLINS, WILL, , ,

Office Sought:  House  Senate  President  
State: CA District: 41

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

Date of Disbursement: 11 / 13 / 2024

FEC Identification Number: C H2CA42205  
Transaction ID : SB23.45641

Amount of Each Disbursement this Period: 70.00

Memo Item

**B. Carter, Jalen M., , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 15701 Terrace Drive  
3BL

City Oak Forest State IL Zip Code 60452

Purpose of Disbursement  
Ballot Curing - In-Kind

Candidate Name  
TRAN, DEREK, , ,

Office Sought:  House  Senate  President  
State: CA District: 45

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

Date of Disbursement: 11 / 13 / 2024

FEC Identification Number: C H4CA45170  
Transaction ID : SB23.45575

Amount of Each Disbursement this Period: 180.00

Memo Item

**C. Carter, Taylor A., , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 25480 Water Wheel Ct

City Menifee State CA Zip Code 92584

Purpose of Disbursement  
Canvassing - In-Kind

Candidate Name  
ROLLINS, WILL, , ,

Office Sought:  House  Senate  President  
State: CA District: 41

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

Date of Disbursement: 10 / 25 / 2024

FEC Identification Number: C H2CA42205  
Transaction ID : SB23.45179

Amount of Each Disbursement this Period: 210.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 460.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Cassil, Noah, , ,**

Mailing Address 9507 Thornhill Road

City  
Silver Spring

State  
MD

Zip Code  
20901

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

GRAY, ADAM C., , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: CA District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			18			2024			

FEC Identification Number

**C** H2CA13115

**Transaction ID : SB23.45749**

Amount of Each Disbursement this Period

200.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Challa, Shreya, , ,**

Mailing Address 99 Sunset Blvd  
Apt 421

City  
Houston

State  
TX

Zip Code  
77005

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

GALLEGO, RUBEN, , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify)

State: AZ District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			13			2024			

FEC Identification Number

**C** S4AZ00139

**Transaction ID : SB23.45551**

Amount of Each Disbursement this Period

40.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Chau, Allison P., , ,**

Mailing Address 1100 Heathrow Dr.

City  
Frisco

State  
TX

Zip Code  
75036

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

GALLEGO, RUBEN, , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: AZ District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			13			2024			

FEC Identification Number

**C** S4AZ00139

**Transaction ID : SB23.45577**

Amount of Each Disbursement this Period

20.00

Memo Item

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

260.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Chow, Alfred F., , ,**

Mailing Address 7 Blueberry hill rd

City  
Weston

State  
MA

Zip Code  
02493

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

TRAN, DEREK, , ,

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: CA District: 45

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	5		2	0	2	4

FEC Identification Number

**C** H4CA45170

**Transaction ID : SB23.45705**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
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Memo Item

Full Name (Last, First, Middle Initial)

**B. Chow, Julia, , ,**

Mailing Address 7 Blueberry Hill Road

City  
Weston

State  
MA

Zip Code  
02493

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

TRAN, DEREK, , ,

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify)

State: CA District: 45

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	3		2	0	2	4

FEC Identification Number

**C** H4CA45170

**Transaction ID : SB23.45632**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
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Memo Item

Full Name (Last, First, Middle Initial)

**C. Chowdree, Nikita, , ,**

Mailing Address 13910 Bell Valley Ct.

City  
Houston

State  
TX

Zip Code  
77059

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

GALLEGO, RUBEN, , ,

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: AZ District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	5		2	0	2	4

FEC Identification Number

**C** S4AZ00139

**Transaction ID : SB23.45692**

Amount of Each Disbursement this Period

4	0	0	0	0	0	0	0	0	0
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Memo Item

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

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

2	4	0	0	0	0	0	0	0	0
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Chu, Allan, , ,**

Mailing Address 829 S Halliday St

City  
Anaheim

State  
CA

Zip Code  
92804

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

DCCC

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

/  /

FEC Identification Number

**C** C00000935

**Transaction ID : SB23.45698**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Cooper, Mumtaz T, , ,**

Mailing Address 565 Adams Ave

City  
Elizabeth

State  
NJ

Zip Code  
07201

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

TRAN, DEREK, , ,

Office Sought:

House  
 Senate  
 President

Disbursement For: 2024

Primary  General  
 Other (specify)

State: CA

District: 45

Date of Disbursement

/  /

FEC Identification Number

**C** H4CA45170

**Transaction ID : SB23.45663**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Dantu, Sumita, , ,**

Mailing Address 2514 Stirling Ave

City  
Edinburg

State  
TX

Zip Code  
78539

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

GALLEGO, RUBEN, , ,

Office Sought:

House  
 Senate  
 President

Disbursement For: 2024

Primary  General  
 Other (specify) ▼

State: AZ

District: 00

Date of Disbursement

/  /

FEC Identification Number

**C** S4AZ00139

**Transaction ID : SB23.45557**

Amount of Each Disbursement this Period

Memo Item

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

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

Form with checkboxes for line numbers 21b, 22, 23, 24, 25, 26, 27, 28a, 28b, 28c, 29, 30b. Line 23 is checked.

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)
YOUTH PROGRESSIVE ACTION CATALYST

Form A: Disbursement for DaPonte, Mia E., , , . Includes fields for Name, Address, City (Houston), State (TX), Zip Code (77005), Purpose (Ballot Curing - In-Kind), Candidate (GALLEGO, RUBEN, , ,), Office Sought (Senate), Disbursement For (2024), and Amount (40.00).

Form B: Disbursement for Dean, Claire S., , , . Includes fields for Name, Address, City (Houston), State (TX), Zip Code (77005), Purpose (Ballot Curing - In-Kind), Candidate (GALLEGO, RUBEN, , ,), Office Sought (Senate), Disbursement For (2024), and Amount (40.00).

Form C: Disbursement for Dey-Foy, Selena A., , , . Includes fields for Name, Address (Tucson), City (Tucson), State (AZ), Zip Code (85701), Purpose (Ballot Curing - In-Kind), Candidate (WHITESIDES, GEORGE, , ,), Office Sought (House), Disbursement For (2024), and Amount (180.00).

SUBTOTAL of Disbursements This Page (optional) 260.00
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)

Grid for line numbers: 21b, 22, 23, 24, 25, 26, 27, 28a, 28b, 28c, 29, 30b. Line 23 is checked.

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

Form A: Dominguez, Christian M. Date of Disbursement: 11/13/2024. FEC Identification Number: C S4AZ00139. Transaction ID: SB23.45553. Amount: 40.00.

Form B: Dow, Eric Liam P. Date of Disbursement: 11/19/2024. FEC Identification Number: C H4CA27111. Transaction ID: SB23.45760. Amount: 170.00.

Form C: Eden, Dillon A. Date of Disbursement: 11/13/2024. FEC Identification Number: C S4AZ00139. Transaction ID: SB23.45607. Amount: 40.00.

SUBTOTAL of Disbursements This Page (optional) 250.00
TOTAL This Period (last page this line number only)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Esayas, Joseias, , ,**

Mailing Address 11810 Lelda Ln.

City  
Houston

State  
TX

Zip Code  
77071

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

DCCC

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2024			

FEC Identification Number

**C** C00000935

**Transaction ID : SB23.45686**

Amount of Each Disbursement this Period

80.00
-------

Memo Item

Full Name (Last, First, Middle Initial)

**B. Esfandiari, Rose, , ,**

Mailing Address 112 Greenmoor

City  
Irvine

State  
CA

Zip Code  
92614

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

GALLEGO, RUBEN, , ,

Office Sought:

 House  
 Senate  
 President

Disbursement For: 2024

 Primary  General  
 Other (specify) ▼

State: AZ

District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2024			

FEC Identification Number

**C** S4AZ00139

**Transaction ID : SB23.45722**

Amount of Each Disbursement this Period

100.00
--------

Memo Item

Full Name (Last, First, Middle Initial)

**C. Esfandiari, Rose, , ,**

Mailing Address 112 Greenmoor

City  
Irvine

State  
CA

Zip Code  
92614

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

GRAY, ADAM C., , ,

Office Sought:

 House  
 Senate  
 President

Disbursement For: 2024

 Primary  General  
 Other (specify) ▼

State: CA

District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2024			

FEC Identification Number

**C** H2CA13115

**Transaction ID : SB23.45723**

Amount of Each Disbursement this Period

100.00
--------

Memo Item

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

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

280.00
--------

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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

## YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial)

**A. Espanet, Connor N., , ,**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		1	4		2	0	2	4		

Mailing Address 1230 University City Blvd  
G76

FEC Identification Number

**C** S6PA00217

**Transaction ID : SB23.45680**

Amount of Each Disbursement this Period

180.00

Memo Item

City Blacksburg

State VA

Zip Code 24060

Purpose of Disbursement

Ballot Curing - In-Kind

Category/  
Type

Candidate Name

CASEY, ROBERT P. JR., , ,

Office Sought:

 House  
 Senate  
 President

Disbursement For: 2024

 Primary  
 General  
 Other (specify) ▼

State: PA

District: 00

Full Name (Last, First, Middle Initial)

**B. Esquen, Tiffany A., , ,**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		1	3		2	0	2	4		

Mailing Address 7630 85th Dr

FEC Identification Number

**C** H2CA42205

**Transaction ID : SB23.45512**

Amount of Each Disbursement this Period

40.00

Memo Item

City Woodhaven

State NY

Zip Code 11421

Purpose of Disbursement

Ballot Curing - In-Kind

Category/  
Type

Candidate Name

ROLLINS, WILL, , ,

Office Sought:

 House  
 Senate  
 President

Disbursement For: 2024

 Primary  
 General  
 Other (specify) ▼

State: CA

District: 41

Full Name (Last, First, Middle Initial)

**C. Esquen, Tiffany A., , ,**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		1	4		2	0	2	4		

Mailing Address 7630 85th Dr

FEC Identification Number

**C** C0000935

**Transaction ID : SB23.45650**

Amount of Each Disbursement this Period

40.00

Memo Item

City Woodhaven

State NY

Zip Code 11421

Purpose of Disbursement

Ballot Curing - In-Kind

Category/  
Type

Candidate Name

DCCC

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  
 General  
 Other (specify) ▼

State:

District:

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

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

260.00

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)

Grid for line numbers 21b-30b with checkboxes, where 23 is checked.

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NAME OF COMMITTEE (In Full) YOUTH PROGRESSIVE ACTION CATALYST

Form A: Esquen, Tiffany A., , , Mailing Address 7630 85th Dr, City Woodhaven, State NY, Zip Code 11421, Purpose of Disbursement Ballot Curing - In-Kind, Candidate Name ROLLINS, WILL, , , Office Sought: House, Disbursement For: 2024, Primary, General, State: CA, District: 41, Date of Disbursement 11/25/2024, FEC Identification Number C H2CA42205, Transaction ID : SB23.45778, Amount of Each Disbursement this Period 80.00, Memo Item.

Form B: Flowers, Lonyah, , , Mailing Address 44110 Carolside Avenue, City Lancaster, State CA, Zip Code 93535, Purpose of Disbursement Ballot Curing - In-Kind, Candidate Name WHITESIDES, GEORGE, , , Office Sought: House, Disbursement For: 2024, Primary, General, State: CA, District: 27, Date of Disbursement 11/13/2024, FEC Identification Number C H4CA27111, Transaction ID : SB23.45645, Amount of Each Disbursement this Period 50.00, Memo Item.

Form C: Francisco, Sonia, , , Mailing Address 118 NW 3rd AVE, City Homestead, State FL, Zip Code 33030, Purpose of Disbursement Ballot Curing - In-Kind, Candidate Name GRAY, ADAM C., , , Office Sought: House, Disbursement For: 2024, Primary, General, State: CA, District: 13, Date of Disbursement 11/19/2024, FEC Identification Number C H2CA13115, Transaction ID : SB23.45768, Amount of Each Disbursement this Period 60.00, Memo Item.

SUBTOTAL of Disbursements This Page (optional) 190.00, TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Fromme, Jeri E., , ,**

Mailing Address 4735 N Scottsdale Rd  
Apt 532

City  
Scottsdale

State  
AZ

Zip Code  
85251

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

GALLEGO, RUBEN, , ,

Office Sought:

 House  
 Senate  
 President

Disbursement For: 2024

 Primary  
 General  
 Other (specify) ▼

State: AZ District: 00

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2024			

FEC Identification Number

**C** S4AZ00139

**Transaction ID : SB23.45712**

Amount of Each Disbursement this Period

140.00
--------

Memo Item

Full Name (Last, First, Middle Initial)

**B. Gaffney, Adrienne E., , ,**

Mailing Address 76 Horatio Street  
1B

City  
New York City

State  
NY

Zip Code  
10014

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

DCCC

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
11			15			2024			

FEC Identification Number

**C** C00000935

**Transaction ID : SB23.45694**

Amount of Each Disbursement this Period

40.00
-------

Memo Item

Full Name (Last, First, Middle Initial)

**C. Garcia, Marle, , ,**

Mailing Address 2310 Evenstar Ln  
Apt 3

City  
Davis

State  
CA

Zip Code  
95616

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

WHITESIDES, GEORGE, , ,

Office Sought:

 House  
 Senate  
 President

Disbursement For: 2024

 Primary  
 General  
 Other (specify) ▼

State: CA District: 27

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			13			2024			

FEC Identification Number

**C** H4CA27111

**Transaction ID : SB23.45505**

Amount of Each Disbursement this Period

60.00
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Memo Item

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

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

240.00
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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

Grid for line numbers: 21b, 22, 23, 24, 25, 26, 27, 28a, 28b, 28c, 29, 30b. Line 23 is checked.

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

Form A: Garcia, Marlen, , , . Includes fields for Full Name, Mailing Address (2310 Evenstar Ln Apt 3), City (Davis, CA), Zip Code (95616), Purpose of Disbursement (Ballot Curing - In-Kind), Candidate Name (DCCC), Office Sought (Senate), Disbursement For (Primary), Date of Disbursement (11/14/2024), FEC Identification Number (C00000935), Transaction ID (SB23.45653), and Amount of Each Disbursement (140.00).

Form B: Gbedee, Eneye J., , , . Includes fields for Full Name, Mailing Address (6310 Main Street), City (Houston, TX), Zip Code (77005), Purpose of Disbursement (Ballot Curing - In-Kind), Candidate Name (GALLEGO, RUBEN, , ,), Office Sought (Senate), Disbursement For (General), Date of Disbursement (11/13/2024), FEC Identification Number (S4AZ00139), Transaction ID (SB23.45631), and Amount of Each Disbursement (100.00).

Form C: Ghahramanians, Emily, , , . Includes fields for Full Name, Mailing Address (7525 Apperson St), City (Tujunga, CA), Zip Code (91042), Purpose of Disbursement (Ballot Curing - In-Kind), Candidate Name (DCCC), Office Sought (Senate), Disbursement For (General), Date of Disbursement (11/15/2024), FEC Identification Number (C00000935), Transaction ID (SB23.45690), and Amount of Each Disbursement (200.00).

SUBTOTAL of Disbursements This Page (optional) 440.00
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)

Form for line numbers: 21b, 22, 23, 24, 25, 26, 27, 28a, 28b, 28c, 29, 30b. Line 23 is checked.

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NAME OF COMMITTEE (In Full)

YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial)

A. Gonzalez, Isabella, , ,

Mailing Address 6360 Main Street

City Houston

State TX

Zip Code 77005

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

GALLEGO, RUBEN, , ,

Office Sought: House, Senate (checked), President

Disbursement For: 2024. Primary, General (checked), Other (specify)

State: AZ District: 00

Date of Disbursement

Date of Disbursement: 11 / 13 / 2024

FEC Identification Number

C S4AZ00139

Transaction ID : SB23.45605

Amount of Each Disbursement this Period

Amount of Each Disbursement this Period: 40.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Granda, Frank, , ,

Mailing Address 10932 Baroque Lane

City San Diego

State CA

Zip Code 92124

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

DCCC

Office Sought: House, Senate, President

Disbursement For: Primary, General

State: District:

Date of Disbursement

Date of Disbursement: 11 / 19 / 2024

FEC Identification Number

C C00000935

Transaction ID : SB23.45766

Amount of Each Disbursement this Period

Amount of Each Disbursement this Period: 200.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Guerrero, Aranza, , ,

Mailing Address 12066 Van Nuys Blvd

City Sylmar

State CA

Zip Code 91342

Purpose of Disbursement

Canvassing - In-Kind

Candidate Name

WHITESIDES, GEORGE, , ,

Office Sought: House (checked), Senate, President

Disbursement For: 2024. Primary, General (checked), Other (specify)

State: CA District: 27

Date of Disbursement

Date of Disbursement: 10 / 28 / 2024

FEC Identification Number

C H4CA27111

Transaction ID : SB23.45017

Amount of Each Disbursement this Period

Amount of Each Disbursement this Period: 50.00

Memo Item

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

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

SUBTOTAL: 290.00

TOTAL: 290.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Guerrero, Aranza, , ,**

Mailing Address 12066 Van Nuys Blvd

City  
Sylmar

State  
CA

Zip Code  
91342

Purpose of Disbursement

Canvassing - In-Kind

Candidate Name

WHITESIDES, GEORGE, , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: CA District: 27

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			28			2024			

FEC Identification Number

**C** H4CA27111

**Transaction ID : SB23.45196**

Amount of Each Disbursement this Period

50.00
-------

Memo Item

Full Name (Last, First, Middle Initial)

**B. Guerrero, Aranza, , ,**

Mailing Address 12066 Van Nuys Blvd

City  
Sylmar

State  
CA

Zip Code  
91342

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

WHITESIDES, GEORGE, , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: CA District: 27

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			13			2024			

FEC Identification Number

**C** H4CA27111

**Transaction ID : SB23.45642**

Amount of Each Disbursement this Period

50.00
-------

Memo Item

Full Name (Last, First, Middle Initial)

**C. Guerrero, Carlos, , ,**

Mailing Address 2310 Evenstar Ln  
Apt 3

City  
Davis

State  
CA

Zip Code  
95616

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

DCCC

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			20			2024			

FEC Identification Number

**C** C0000935

**Transaction ID : SB23.45770**

Amount of Each Disbursement this Period

200.00
--------

Memo Item

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

300.00
--------

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

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

Grid for line numbers: 21b, 22, 23, 24, 25, 26, 27, 28a, 28b, 28c, 29, 30b. Line 23 is checked.

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

Form A: Disbursement for Abbie M. Ha. Date: 11/13/2024. Amount: 20.00. Transaction ID: SB23.45567.

Form B: Disbursement for Nancy Halberstadt. Date: 11/13/2024. Amount: 160.00. Transaction ID: SB23.45634.

Form C: Disbursement for Katherine A. Hall. Date: 11/13/2024. Amount: 60.00. Transaction ID: SB23.45538.

SUBTOTAL of Disbursements This Page (optional) 240.00
TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Hernandez, Van, , ,**

Mailing Address 1605 Rice Blvd  
1605 Rice Blvd

City Houston State TX Zip Code 77005

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

GALLEGO, RUBEN, , ,

Office Sought:  House  
 Senate  
 President  
State: AZ District: 00

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			13			2024			

FEC Identification Number

**C** S4AZ00139

**Transaction ID : SB23.45609**

Amount of Each Disbursement this Period

40.00
-------

Memo Item

Full Name (Last, First, Middle Initial)

**B. Herrera, Adrienne E., , ,**

Mailing Address P. O. Box 1710  
P.O. Box 1710

City New York State NY Zip Code 10037

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

GRAY, ADAM C., , ,

Office Sought:  House  
 Senate  
 President  
State: CA District: 13

Disbursement For: 2024  
 Primary  General  
 Other (specify)

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2024			

FEC Identification Number

**C** H2CA13115

**Transaction ID : SB23.45725**

Amount of Each Disbursement this Period

100.00
--------

Memo Item

Full Name (Last, First, Middle Initial)

**C. Herrera, Adrienne E., , ,**

Mailing Address P. O. Box 1710  
P.O. Box 1710

City New York State NY Zip Code 10037

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

CASEY, ROBERT P. JR., , ,

Office Sought:  House  
 Senate  
 President  
State: PA District: 00

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2024			

FEC Identification Number

**C** S6PA00217

**Transaction ID : SB23.45726**

Amount of Each Disbursement this Period

100.00
--------

Memo Item

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

240.00
--------

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Howley, Will, , ,**

Mailing Address 9 Sunset Blvd  
Rice University

City Houston State TX Zip Code 77005

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

GALLEGO, RUBEN, , ,

Office Sought:  House  Senate  President  
State: AZ District: 00

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			13			2024			

FEC Identification Number

**C** S4AZ00139

**Transaction ID : SB23.45587**

Amount of Each Disbursement this Period

20.00
-------

Memo Item

Full Name (Last, First, Middle Initial)

**B. Humphreys, Elias, , ,**

Mailing Address 590 E Olive Ave.  
Apt. H

City Monrovia State CA Zip Code 91016

Purpose of Disbursement

Canvassing - In-Kind

Candidate Name

ROLLINS, WILL, , ,

Office Sought:  House  Senate  President  
State: CA District: 41

Disbursement For: 2024  
 Primary  General  
 Other (specify)

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			25			2024			

FEC Identification Number

**C** H2CA42205

**Transaction ID : SB23.45180**

Amount of Each Disbursement this Period

210.00
--------

Memo Item

Full Name (Last, First, Middle Initial)

**C. Hunley, Brigette, , ,**

Mailing Address 2813 Iris Court

City Fairfield State CA Zip Code 94533

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

GRAY, ADAM C., , ,

Office Sought:  House  Senate  President  
State: CA District: 13

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			18			2024			

FEC Identification Number

**C** H2CA13115

**Transaction ID : SB23.45746**

Amount of Each Disbursement this Period

200.00
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Memo Item

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

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

430.00
--------

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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Hunley, Hannah, , ,**

Mailing Address 2813 Iris Court

City  
Fairfield

State  
CA

Zip Code  
94533

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

GRAY, ADAM C., , ,

Office Sought:

 House  
 Senate  
 President

Disbursement For: 2024

 Primary  
 General  
 Other (specify) ▼

State: CA

District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	8		2	0	2	4

FEC Identification Number

**C** H2CA13115

**Transaction ID : SB23.45748**

Amount of Each Disbursement this Period

200.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Inzunza, Lizette, , ,**

Mailing Address 8108 Elizabeth Avenue

City  
South Gate

State  
CA

Zip Code  
90280

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

TRAN, DEREK, , ,

Office Sought:

 House  
 Senate  
 President

Disbursement For: 2024

 Primary  
 General  
 Other (specify) ▼

State: CA

District: 45

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	3		2	0	2	4

FEC Identification Number

**C** H4CA45170

**Transaction ID : SB23.45565**

Amount of Each Disbursement this Period

100.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Inzunza, Lizette, , ,**

Mailing Address 8108 Elizabeth Avenue

City  
South Gate

State  
CA

Zip Code  
90280

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

TRAN, DEREK, , ,

Office Sought:

 House  
 Senate  
 President

Disbursement For: 2024

 Primary  
 General  
 Other (specify) ▼

State: CA

District: 45

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	4		2	0	2	4

FEC Identification Number

**C** H4CA45170

**Transaction ID : SB23.45668**

Amount of Each Disbursement this Period

100.00

Memo Item

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

400.00

**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)

Grid for line numbers: 21b, 22, 23, 24, 25, 26, 27, 28a, 28b, 28c, 29, 30b. Box 23 is checked.

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

Form A: Inzunza, Lizette, , , . Includes fields for Full Name, Mailing Address (8108 Elizabeth Avenue), City (South Gate), State (CA), Zip Code (90280), Purpose of Disbursement (Ballot Curing - In-Kind), Candidate Name (ROLLINS, WILL, , ,), Office Sought (House), Disbursement For (2024), and Amount of Each Disbursement (100.00).

Form B: Inzunza, Lucia, , , . Includes fields for Full Name, Mailing Address (8108 Elizabeth Ave), City (South Gate), State (CA), Zip Code (90280), Purpose of Disbursement (Ballot Curing - In-Kind), Candidate Name (ROLLINS, WILL, , ,), Office Sought (House), Disbursement For (2024), and Amount of Each Disbursement (100.00).

Form C: Iqbal, Ayla, , , . Includes fields for Full Name, Mailing Address (1284 Dutch Broadway), City (Valley Stream), State (NY), Zip Code (11580), Purpose of Disbursement (Ballot Curing - In-Kind), Candidate Name (GRAY, ADAM C., , ,), Office Sought (House), Disbursement For (2024), and Amount of Each Disbursement (160.00).

SUBTOTAL of Disbursements This Page (optional) 360.00
TOTAL This Period (last page this line number only)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Jackson, Destiny, , ,**

Mailing Address 152 Vine St SW  
Apt 212

City Atlanta State GA Zip Code 30314

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

DCCC

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
11			14			2024			

FEC Identification Number

**C** C00000935

**Transaction ID : SB23.45651**

Amount of Each Disbursement this Period

100.00
--------

Memo Item

Full Name (Last, First, Middle Initial)

**B. Jacobs, Alida, , ,**

Mailing Address 3748 Mountain View Avenue

City Los Angeles State CA Zip Code 90066

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

WHITESIDES, GEORGE, , ,

Office Sought:  House  Senate  President

State: CA District: 27

Disbursement For: 2024  Primary  General  Other (specify)

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			13			2024			

FEC Identification Number

**C** H4CA27111

**Transaction ID : SB23.45637**

Amount of Each Disbursement this Period

200.00
--------

Memo Item

Full Name (Last, First, Middle Initial)

**C. Jain, Stuti, , ,**

Mailing Address 6320 Main St

City Houston State TX Zip Code 77005

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

WHITESIDES, GEORGE, , ,

Office Sought:  House  Senate  President

State: CA District: 27

Disbursement For: 2024  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			13			2024			

FEC Identification Number

**C** H4CA27111

**Transaction ID : SB23.45593**

Amount of Each Disbursement this Period

40.00
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Memo Item

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

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

340.00
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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

Form for line numbers 21b-30b with checkboxes, where 23 is checked.

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

Form A: Jennings, Griffith, , , . Includes fields for Name, Address, City (Northridge), State (CA), Zip (91326), Purpose (Ballot Curing - In-Kind), Candidate Name (DCCC), Office Sought (Senate), Disbursement For (Primary), Date (11/14/2024), FEC ID (C00000935), Transaction ID (SB23.45658), and Amount (200.00).

Form B: Jing, Melody, , , . Includes fields for Name, Address, City (Houston), State (TX), Zip (77004), Purpose (Ballot Curing - In-Kind), Candidate Name (GALLEGO, RUBEN, , ,), Office Sought (Senate), Disbursement For (General), Date (11/13/2024), FEC ID (S4AZ00139), Transaction ID (SB23.45563), and Amount (20.00).

Form C: Johnson, Lauriel M., , , . Includes fields for Name, Address, City (Houston), State (TX), Zip (77005), Purpose (Ballot Curing - In-Kind), Candidate Name (GALLEGO, RUBEN, , ,), Office Sought (Senate), Disbursement For (General), Date (11/13/2024), FEC ID (S4AZ00139), Transaction ID (SB23.45516), and Amount (20.00).

SUBTOTAL of Disbursements This Page (optional) 240.00
TOTAL This Period (last page this line number only)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Kagan, Benjamin, , ,**

Mailing Address 6100 Main Street

City  
Houston

State  
TX

Zip Code  
77005

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

GALLEGO, RUBEN, , ,

Office Sought:

 House  
 Senate  
 President

Disbursement For: 2024

 Primary  
 General  
 Other (specify) ▼

State: AZ

District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	4		2	0	2	4

FEC Identification Number

**C** S4AZ00139

**Transaction ID : SB23.45654**

Amount of Each Disbursement this Period

60.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Kalabic, Elvisa, , ,**

Mailing Address 1618 Saint Agnes Avenue

City  
Utica

State  
NY

Zip Code  
13501

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

DCCC

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  
 General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	4		2	0	2	4

FEC Identification Number

**C** C00000935

**Transaction ID : SB23.45682**

Amount of Each Disbursement this Period

200.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Karimi, Parwana, , ,**

Mailing Address 86 Jones Station Rd  
Arnold

City  
Arnold

State  
MD

Zip Code  
21012

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

GALLEGO, RUBEN, , ,

Office Sought:

 House  
 Senate  
 President

Disbursement For: 2024

 Primary  
 General  
 Other (specify) ▼

State: AZ

District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	3		2	0	2	4

FEC Identification Number

**C** S4AZ00139

**Transaction ID : SB23.45555**

Amount of Each Disbursement this Period

20.00

Memo Item

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

280.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Khdlaryan, Jacqueline, , ,**

Mailing Address 13656 Polk St

City  
Sylmar

State  
CA

Zip Code  
91342

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

TRAN, DEREK, , ,

Office Sought:

 House  
 Senate  
 President

Disbursement For: 2024

 Primary  
 General  
 Other (specify) ▼

State: CA

District: 45

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			14			2024			

FEC Identification Number

**C** H4CA45170

**Transaction ID : SB23.45661**

Amount of Each Disbursement this Period

200.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Khdlaryan, Jasmine, , ,**

Mailing Address 13656 Polk St.

City  
Sylmar

State  
CA

Zip Code  
91342

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

TRAN, DEREK, , ,

Office Sought:

 House  
 Senate  
 President

Disbursement For: 2024

 Primary  
 General  
 Other (specify) ▼

State: CA

District: 45

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			13			2024			

FEC Identification Number

**C** H4CA45170

**Transaction ID : SB23.45579**

Amount of Each Disbursement this Period

100.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Kim, Alex, , ,**

Mailing Address 6310 Main St

City  
Houston

State  
TX

Zip Code  
77005

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

GALLEGO, RUBEN, , ,

Office Sought:

 House  
 Senate  
 President

Disbursement For: 2024

 Primary  
 General  
 Other (specify) ▼

State: AZ

District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			13			2024			

FEC Identification Number

**C** S4AZ00139

**Transaction ID : SB23.45569**

Amount of Each Disbursement this Period

200.00

Memo Item

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

500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial) <b>A. Kim, Andrew D., , ,</b>		Date of Disbursement MM / DD / YYYY 11 / 13 / 2024
Mailing Address 6310 Main St		FEC Identification Number C S4AZ00139 <b>Transaction ID : SB23.45523</b>
City Houston	State TX	Zip Code 77005
Purpose of Disbursement Ballot Curing - In-Kind		Category/ Type
Candidate Name GALLEGO, RUBEN, , ,		Amount of Each Disbursement this Period 40.00
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: AZ	District: 00	

Full Name (Last, First, Middle Initial) <b>B. Kim, Elena, , ,</b>		Date of Disbursement MM / DD / YYYY 11 / 15 / 2024
Mailing Address 1045 3rd St 202		FEC Identification Number C S6PA00217 <b>Transaction ID : SB23.45696</b>
City Santa Monica	State CA	Zip Code 90403
Purpose of Disbursement Ballot Curing - In-Kind		Category/ Type
Candidate Name CASEY, ROBERT P. JR., , ,		Amount of Each Disbursement this Period 60.00
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item
State: PA	District: 00	

Full Name (Last, First, Middle Initial) <b>C. Kim, Seokhyun, , ,</b>		Date of Disbursement MM / DD / YYYY 11 / 13 / 2024
Mailing Address 9003 Scotsman Dr		FEC Identification Number C S4AZ00139 <b>Transaction ID : SB23.45639</b>
City Austin	State TX	Zip Code 78750
Purpose of Disbursement Ballot Curing - In-Kind		Category/ Type
Candidate Name GALLEGO, RUBEN, , ,		Amount of Each Disbursement this Period 200.00
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: AZ	District: 00	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Kirkpatrick, Kristin, , ,**

Mailing Address 2010 High Pointe Dr.  
Apt. 276

City Brandon State MS Zip Code 39042

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

DCCC

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 19 / 2024

FEC Identification Number

**C** C00000935

**Transaction ID : SB23.45757**

Amount of Each Disbursement this Period

120.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Klein, Jacob D., , ,**

Mailing Address 1212 Alvarado Avenue  
Apt 6

City Davis State CA Zip Code 95616

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

GRAY, ADAM C., , ,

Office Sought:  House  Senate  President

State: CA District: 13

Disbursement For: 2024  Primary  General  Other (specify)

Date of Disbursement

MM / DD / YYYY  
11 / 15 / 2024

FEC Identification Number

**C** H2CA13115

**Transaction ID : SB23.45708**

Amount of Each Disbursement this Period

120.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Kramer, Scott, , ,**

Mailing Address 4735 North Scottsdale Road

City Scottsdale State AZ Zip Code 85251

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

GALLEGO, RUBEN, , ,

Office Sought:  House  Senate  President

State: AZ District: 00

Disbursement For: 2024  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 15 / 2024

FEC Identification Number

**C** S4AZ00139

**Transaction ID : SB23.45710**

Amount of Each Disbursement this Period

140.00

Memo Item

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

380.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Krause, E.M., , ,**

Mailing Address 1599 SW 113th Ave  
525C

City Miami State FL Zip Code 33174

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

DCCC

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2024			

FEC Identification Number

**C** C00000935

**Transaction ID : SB23.45707**

Amount of Each Disbursement this Period

100.00
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Memo Item

Full Name (Last, First, Middle Initial)

**B. Kurp, David J., , ,**

Mailing Address 5011 Moss Hollow Ct.

City Houston State TX Zip Code 77018

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

GALLEGO, RUBEN, , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify)

State: AZ District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			13			2024			

FEC Identification Number

**C** S4AZ00139

**Transaction ID : SB23.45595**

Amount of Each Disbursement this Period

40.00
-------

Memo Item

Full Name (Last, First, Middle Initial)

**C. Lee, Anna I., , ,**

Mailing Address 9 Sunset Blvd.  
Rice University

City Houston State TX Zip Code 77005

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

GALLEGO, RUBEN, , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: AZ District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			13			2024			

FEC Identification Number

**C** S4AZ00139

**Transaction ID : SB23.45589**

Amount of Each Disbursement this Period

20.00
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Memo Item

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

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

160.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Leon, Ashley, , ,**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		2	0		2	0	2	4		

Mailing Address 735 Campus Dr.  
Apt. 513

City State Zip Code  
Stanford CA 94305

FEC Identification Number

**C** H2CA13115

**Transaction ID : SB23.45772**

Amount of Each Disbursement this Period

100.00

Memo Item

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

GRAY, ADAM C., , ,

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: CA District: 13

Full Name (Last, First, Middle Initial)

**B. Lim, Meghan, , ,**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		1	3		2	0	2	4		

Mailing Address 6330 Main Street

City State Zip Code  
Houston TX 77005

FEC Identification Number

**C** S4AZ00139

**Transaction ID : SB23.45613**

Amount of Each Disbursement this Period

40.00

Memo Item

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

GALLEGO, RUBEN, , ,

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: AZ District: 00

Full Name (Last, First, Middle Initial)

**C. Lyden, Kate, , ,**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	0		2	3		2	0	2	4		

Mailing Address 608 Avenue A

City State Zip Code  
Trevose PA 19053

FEC Identification Number

**C** H2PA01099

**Transaction ID : SB23.44969**

Amount of Each Disbursement this Period

150.00

Memo Item

Purpose of Disbursement

Canvassing - In-Kind

Candidate Name

EHASZ, ASHLEY, , ,

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: PA District: 01

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

290.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Manalo, Jeriko, , ,**

Mailing Address 25480 Water Wheel Ct

City Menifee State CA Zip Code 92584

Purpose of Disbursement

Canvassing - In-Kind

Candidate Name

ROLLINS, WILL, , ,

Office Sought:  House  Senate  President

State: CA District: 41

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			25			2024			

FEC Identification Number

**C** H2CA42205

**Transaction ID : SB23.45178**

Amount of Each Disbursement this Period

100	00	00	00	00	00	00	00	00	00
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Memo Item

Full Name (Last, First, Middle Initial)

**B. Marant, Olivia M., , ,**

Mailing Address 506 Idlewild Dr  
B

City Houma State LA Zip Code 70364

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

TRAN, DEREK, , ,

Office Sought:  House  Senate  President

State: CA District: 45

Disbursement For: 2024  
 Primary  General  
 Other (specify)

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			14			2024			

FEC Identification Number

**C** H4CA45170

**Transaction ID : SB23.45648**

Amount of Each Disbursement this Period

200	00	00	00	00	00	00	00	00	00
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Memo Item

Full Name (Last, First, Middle Initial)

**C. Marquez, Ramon, , ,**

Mailing Address PO Box 1540

City McCloud State OK Zip Code 74851

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

GRAY, ADAM C., , ,

Office Sought:  House  Senate  President

State: CA District: 13

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			18			2024			

FEC Identification Number

**C** H2CA13115

**Transaction ID : SB23.45742**

Amount of Each Disbursement this Period

200	00	00	00	00	00	00	00	00	00
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Memo Item

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

550	00	00	00	00	00	00	00	00	00
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**TOTAL** This Period (last page this line number only).....▶

550	00	00	00	00	00	00	00	00	00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Matsumoto, Samuel, , ,**

Mailing Address 15119 Killion St.

City  
Sherman Oaks

State  
CA

Zip Code  
91411

Purpose of Disbursement  
In-Kind - Canvassing Stipend

Candidate Name

WHITESIDES, GEORGE, , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: CA District: 27

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			28			2024			

FEC Identification Number

**C** H4CA27111

**Transaction ID : SB23.45194**

Amount of Each Disbursement this Period

70.00
-------

Memo Item

Full Name (Last, First, Middle Initial)

**B. Maxson, Charlie, , ,**

Mailing Address 2108 Banks St

City  
Houston

State  
TX

Zip Code  
77098

Purpose of Disbursement  
Ballot Curing - In-Kind

Candidate Name

GALLEGO, RUBEN, , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify)

State: AZ District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			13			2024			

FEC Identification Number

**C** S4AZ00139

**Transaction ID : SB23.45601**

Amount of Each Disbursement this Period

40.00
-------

Memo Item

Full Name (Last, First, Middle Initial)

**C. McConnell, Emma M., , ,**

Mailing Address 6360 Main St.

City  
Houston

State  
TX

Zip Code  
77005

Purpose of Disbursement  
Ballot Curing - In-Kind

Candidate Name

GALLEGO, RUBEN, , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: AZ District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			13			2024			

FEC Identification Number

**C** S4AZ00139

**Transaction ID : SB23.45619**

Amount of Each Disbursement this Period

40.00
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Memo Item

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

150.00
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**TOTAL** This Period (last page this line number only).....▶

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

Grid for line numbers 21b-30b with checkboxes, where 23 is checked.

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NAME OF COMMITTEE (In Full) YOUTH PROGRESSIVE ACTION CATALYST

Form A: Menjivar, Emilia E., , , . Includes fields for Full Name, Mailing Address (124 Merrydale Road Apt 11, San Rafael, CA 94903), Purpose of Disbursement (Ballot Curing - In-Kind), Candidate Name (DCCC), Office Sought (House, Senate, President), Disbursement For (Primary, General, Other), Date of Disbursement (11/15/2024), FEC Identification Number (C00000935), Transaction ID (SB23.45688), and Amount of Each Disbursement (200.00).

Form B: Miller, Kimberly M., , , . Includes fields for Full Name, Mailing Address (1000 Island Pointe Drive Apt 314, Jacksonville, FL 32247), Purpose of Disbursement (Ballot Curing - In-Kind), Candidate Name (TRAN, DEREK, , ,), Office Sought (House, Senate, President), Disbursement For (Primary, General, Other), Date of Disbursement (11/13/2024), FEC Identification Number (H4CA45170), Transaction ID (SB23.45625), and Amount of Each Disbursement (80.00).

Form C: Muniz, Jesse, , , . Includes fields for Full Name, Mailing Address (2331 Great Light Dr., Dallas, TX 75228), Purpose of Disbursement (Ballot Curing - In-Kind), Candidate Name (GALLEGO, RUBEN, , ,), Office Sought (House, Senate, President), Disbursement For (Primary, General, Other), Date of Disbursement (11/13/2024), FEC Identification Number (S4AZ00139), Transaction ID (SB23.45532), and Amount of Each Disbursement (40.00).

SUBTOTAL of Disbursements This Page (optional) 320.00
TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Murray, Aaliyah A., , ,**

Mailing Address 1105 W 28th St

City  
Minneapolis

State  
MN

Zip Code  
55408

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

DCCC

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			14			2024			

FEC Identification Number

**C** C00000935

**Transaction ID : SB23.45683**

Amount of Each Disbursement this Period

200.00
--------

Memo Item

Full Name (Last, First, Middle Initial)

**B. Nguyen, Vincent, , ,**

Mailing Address 2261 Tywood Ct

City  
San Jose

State  
CA

Zip Code  
95116

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

DCCC

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			14			2024			

FEC Identification Number

**C** C00000935

**Transaction ID : SB23.45670**

Amount of Each Disbursement this Period

100.00
--------

Memo Item

Full Name (Last, First, Middle Initial)

**C. Nkhoma, Mlumbeni, , ,**

Mailing Address 6705 Ainsworth St

City  
Gainesville

State  
VA

Zip Code  
20155

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

DCCC

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			14			2024			

FEC Identification Number

**C** C00000935

**Transaction ID : SB23.45656**

Amount of Each Disbursement this Period

200.00
--------

Memo Item

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

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

500.00
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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Oliver, Penelope L, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 1694 Bowen Dr.

City Folsom State CA Zip Code 95630

Purpose of Disbursement  
Ballot Curing - In-Kind

Candidate Name  
GRAY, ADAM C., , ,

Office Sought:  House  Senate  President  
State: CA District: 13

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

Date of Disbursement: 11 / 25 / 2024

FEC Identification Number: C H2CA13115  
Transaction ID : SB23.45780  
Amount of Each Disbursement this Period: 120.00

Memo Item

**B. Olivia, Seo, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 9 sunset blvd

City Houston State TX Zip Code 77005

Purpose of Disbursement  
Ballot Curing - In-Kind

Candidate Name  
GALLEGO, RUBEN, , ,

Office Sought:  House  Senate  President  
State: AZ District: 00

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

Date of Disbursement: 11 / 13 / 2024

FEC Identification Number: C S4AZ00139  
Transaction ID : SB23.45611  
Amount of Each Disbursement this Period: 40.00

Memo Item

**C. Onwuamaegbu, Kosi T. U., , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 5404 Tuscarawas Road

City Bethesda State MD Zip Code 20816

Purpose of Disbursement  
Ballot Curing - In-Kind

Candidate Name  
GALLEGO, RUBEN, , ,

Office Sought:  House  Senate  President  
State: AZ District: 00

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

Date of Disbursement: 11 / 13 / 2024

FEC Identification Number: C S4AZ00139  
Transaction ID : SB23.45549  
Amount of Each Disbursement this Period: 40.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 200.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Ortiz-Miguel, Ingris, , ,**

Mailing Address 2949 Portage Bay W  
Apt 138

City Davis State CA Zip Code 95616

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

GRAY, ADAM C., , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: CA District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	5		2	0	2	4

FEC Identification Number

**C** H2CA13115

**Transaction ID : SB23.45783**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
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Memo Item

Full Name (Last, First, Middle Initial)

**B. Painter, Katherine L. M., , ,**

Mailing Address 9 Sunset Blvd

City Houston State TX Zip Code 77005

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

GALLEGO, RUBEN, , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify)

State: AZ District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	3		2	0	2	4

FEC Identification Number

**C** S4AZ00139

**Transaction ID : SB23.45615**

Amount of Each Disbursement this Period

4	0	0	0	0	0	0	0	0	0
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Memo Item

Full Name (Last, First, Middle Initial)

**C. Parra, Marisol, , ,**

Mailing Address 2741 Somis Rd  
Apt 303

City Camarillo State CA Zip Code 93066

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

GRAY, ADAM C., , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: CA District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	9		2	0	2	4

FEC Identification Number

**C** H2CA13115

**Transaction ID : SB23.45755**

Amount of Each Disbursement this Period

1	6	0	0	0	0	0	0	0	0
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Memo Item

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

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

2	5	0	0	0	0	0	0	0	0
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Parra, Marisol, , ,**

Full Name (Last, First, Middle Initial)

Date of Disbursement:  /  /

Mailing Address: 2741 Somis Rd Apt 303

City: Camarillo State: CA Zip Code: 93066

Purpose of Disbursement: Ballot Curing - In-Kind

Candidate Name: GRAY, ADAM C., , ,

Office Sought:  House  Senate  President

Disbursement For: 2024  Primary  General  Other (specify) ▼

State: CA District: 13

FEC Identification Number: **C H2CA13115**  
**Transaction ID : SB23.45781**  
Amount of Each Disbursement this Period:

Memo Item

**B. Perez, Abigail, , ,**

Full Name (Last, First, Middle Initial)

Date of Disbursement:  /  /

Mailing Address: 1601 Rice Blvd

City: Houston State: TX Zip Code: 77005

Purpose of Disbursement: Ballot Curing - In-Kind

Candidate Name: GALLEGO, RUBEN, , ,

Office Sought:  House  Senate  President

Disbursement For: 2024  Primary  General  Other (specify) ▼

State: AZ District: 00

FEC Identification Number: **C S4AZ00139**  
**Transaction ID : SB23.45534**  
Amount of Each Disbursement this Period:

Memo Item

**C. Pinsof-Berlowitz, Miles, , ,**

Full Name (Last, First, Middle Initial)

Date of Disbursement:  /  /

Mailing Address: 2408 W 34th Ave

City: Anchorage State: AK Zip Code: 99517

Purpose of Disbursement: In-Kind - Canvassing Stipend

Candidate Name: PELTOLA, MARY, , ,

Office Sought:  House  Senate  President

Disbursement For: 2024  Primary  General  Other (specify) ▼

State: AK District: 01

FEC Identification Number: **C H2AK01158**  
**Transaction ID : SB23.45153**  
Amount of Each Disbursement this Period:

Memo Item

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

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

Form for line numbers 21b-30b with checkboxes for categories 21b, 22, 23, 26, 27, 28a, 28b, 28c, 29, 30b.

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

Form A: Pollack, Justin A, , ,
Mailing Address 42 Climbing Vine
City Irvine, State CA, Zip Code 92603
Purpose of Disbursement: Ballot Curing - In-Kind
Candidate Name: WHITESIDES, GEORGE, , ,
Office Sought: House, Senate, President
Disbursement For: 2024
Primary, General, Other (specify)
State: CA, District: 27
Date of Disbursement: 11 / 13 / 2024
FEC Identification Number: C H4CA27111
Transaction ID: SB23.45640
Amount of Each Disbursement this Period: 70.00
Memo Item: [ ]

Form B: Popper, Joanna, , ,
Mailing Address 8449 Blackburn Ave 1
City Los Angeles, State CA, Zip Code 90048
Purpose of Disbursement: Ballot Curing - In-Kind
Candidate Name: GALLEGO, RUBEN, , ,
Office Sought: House, Senate, President
Disbursement For: 2024
Primary, General, Other (specify)
State: AZ, District: 00
Date of Disbursement: 11 / 15 / 2024
FEC Identification Number: C S4AZ00139
Transaction ID: SB23.45720
Amount of Each Disbursement this Period: 100.00
Memo Item: [ ]

Form C: Popper, Joanna, , ,
Mailing Address 8449 Blackburn Ave 1
City Los Angeles, State CA, Zip Code 90048
Purpose of Disbursement: Ballot Curing - In-Kind
Candidate Name: CASEY, ROBERT P. JR., , ,
Office Sought: House, Senate, President
Disbursement For: 2024
Primary, General, Other (specify)
State: PA, District: 00
Date of Disbursement: 11 / 15 / 2024
FEC Identification Number: C S6PA00217
Transaction ID: SB23.45721
Amount of Each Disbursement this Period: 100.00
Memo Item: [ ]

SUBTOTAL of Disbursements This Page (optional)..... 270.00
TOTAL This Period (last page this line number only).....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

## YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial)

**A. Preston, Edward M., , ,**

Mailing Address 8718 Magna St.

City  
Houston

State  
TX

Zip Code  
77093

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

WHITESIDES, GEORGE, , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: CA District: 27

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	3		2	0	2	4

FEC Identification Number

**C** H4CA27111

**Transaction ID : SB23.45525**

Amount of Each Disbursement this Period

200.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Proell, Abigail E., , ,**

Mailing Address 6310 Main Street

City  
Houston

State  
TX

Zip Code  
77005

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

GALLEGO, RUBEN, , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify)

State: AZ District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	3		2	0	2	4

FEC Identification Number

**C** S4AZ00139

**Transaction ID : SB23.45519**

Amount of Each Disbursement this Period

60.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Pyralu, Hasan, , ,**

Mailing Address 4554 Larimer St  
Apt 501

City  
Dublin

State  
OH

Zip Code  
80216

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

GRAY, ADAM C., , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: CA District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	5		2	0	2	4

FEC Identification Number

**C** H2CA13115

**Transaction ID : SB23.45728**

Amount of Each Disbursement this Period

200.00

Memo Item

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

460.00

**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)

Form for line numbers: 21b, 22, 23, 24, 25, 26, 27, 28a, 28b, 28c, 29, 30b. Line 23 is checked.

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)
YOUTH PROGRESSIVE ACTION CATALYST

Form A: Disbursement for Qu, Angel J., , , . Includes fields for Name, Address, Date (11/13/2024), City (Houston, TX), Zip (77005), Purpose (Ballot Curing - In-Kind), Candidate (GALLEGO, RUBEN, , ,), Office Sought (Senate), Disbursement For (2024), and Amount (20.00).

Form B: Disbursement for Quintero, Eva E., , , . Includes fields for Name, Address, Date (11/13/2024), City (Redlands, CA), Zip (92373), Purpose (Ballot Curing - In-Kind), Candidate (TRAN, DEREK, , ,), Office Sought (House), Disbursement For (224), and Amount (150.00).

Form C: Disbursement for Quiroz, Jamie, , , . Includes fields for Name, Address, Date (11/13/2024), City (New York, NY), Zip (10029), Purpose (Ballot Curing - In-Kind), Candidate (CASEY, ROBERT P. JR., , ,), Office Sought (Senate), Disbursement For (2024), and Amount (40.00).

SUBTOTAL of Disbursements This Page (optional) 210.00
TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:  
(check only one)

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

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)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Quiroz, Jamie A., , ,**

Mailing Address 170 East 112th Street  
Apartment 2C

City New York State NY Zip Code 10029

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

ROLLINS, WILL, , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: CA District: 41

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			13			2024			

FEC Identification Number

**C** H2CA42205

**Transaction ID : SB23.45617**

Amount of Each Disbursement this Period

40.00
-------

Memo Item

Full Name (Last, First, Middle Initial)

**B. Reddy, Aleena M., , ,**

Mailing Address 1752 Elizabeth's Walk

City Winter Park State FL Zip Code 32789

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

TRAN, DEREK, , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: CA District: 45

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			13			2024			

FEC Identification Number

**C** H4CA45170

**Transaction ID : SB23.45621**

Amount of Each Disbursement this Period

60.00
-------

Memo Item

Full Name (Last, First, Middle Initial)

**C. Redic, Calen, , ,**

Mailing Address 6310 Main St

City Houston State TX Zip Code 77005

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

GALLEGO, RUBEN, , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: AZ District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2024			

FEC Identification Number

**C** S4AZ00139

**Transaction ID : SB23.45703**

Amount of Each Disbursement this Period

80.00
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Memo Item

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

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

180.00
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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

Grid for line numbers: 21b, 22, 23, 24, 25, 26, 27, 28a, 28b, 28c, 29, 30b. Line 23 is checked.

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

Form A: Reed, Riley E., , ,
Mailing Address: 22 M St NE Apt 902, Washington DC
Purpose: Ballot Curing - In-Kind
Amount: 40.00
Transaction ID: SB23.45676

Form B: Robertson, Ebony Jade R., , ,
Mailing Address: 6360 Main Street, Houston TX
Purpose: Ballot Curing - In-Kind
Amount: 40.00
Transaction ID: SB23.45536

Form C: Rodriguez, Asanti G., , ,
Mailing Address: 1252 S Fairfax Rd, Bakersfield CA
Purpose: Ballot Curing - In-Kind
Amount: 160.00
Transaction ID: SB23.45739

SUBTOTAL of Disbursements This Page (optional) 240.00
TOTAL This Period (last page this line number only)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Rodriguez, Raquel, , ,**

Mailing Address 26877 old alice road

City  
Lyford

State  
TX

Zip Code  
78569

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

GALLEGO, RUBEN, , ,

Office Sought:

 House  
 Senate  
 President

Disbursement For: 2024

 Primary  
 General  
 Other (specify) ▼

State: AZ

District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	4		2	0	2	4

FEC Identification Number

**C** S4AZ00139

**Transaction ID : SB23.45678**

Amount of Each Disbursement this Period

160.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Rodriguez, Raquel, , ,**

Mailing Address 26877 old alice road

City  
Lyford

State  
TX

Zip Code  
78569

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

DCCC

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  
 General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	5		2	0	2	4

FEC Identification Number

**C** C00000935

**Transaction ID : SB23.45714**

Amount of Each Disbursement this Period

180.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Roos, Sara, , ,**

Mailing Address 3748 Mountain View Ave

City  
Los Angeles

State  
CA

Zip Code  
90066

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

GALLEGO, RUBEN, , ,

Office Sought:

 House  
 Senate  
 President

Disbursement For: 2024

 Primary  
 General  
 Other (specify) ▼

State: AZ

District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	5		2	0	2	4

FEC Identification Number

**C** S4AZ00139

**Transaction ID : SB23.45717**

Amount of Each Disbursement this Period

200.00

Memo Item

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

540.00

**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)

Form for line numbers 21b-30b with checkboxes, where 23 is checked.

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

Form A: Disbursement for Audrey L. Rothenberg, Los Angeles, CA, Ballot Curing - In-Kind, DCCC, \$60.00.

Form B: Disbursement for Sahi, Armanpreet S., Springfield, VA, Ballot Curing - In-Kind, CASEY, ROBERT P. JR., \$60.00.

Form C: Disbursement for SanMartin, Sophia, Valencia, CA, Canvassing - In-Kind, WHITESIDES, GEORGE, \$70.00.

SUBTOTAL of Disbursements This Page (optional) 190.00
TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. SanMartin, Sophia, , ,**

Mailing Address 24133 Breton Ct

City  
Valencia

State  
CA

Zip Code  
91355

Purpose of Disbursement

Canvassing - In-Kind

Candidate Name

WHITESIDES, GEORGE, , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: CA District: 27

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	3		2	0	2	4

FEC Identification Number

**C** H4CA27111

**Transaction ID : SB23.45500**

Amount of Each Disbursement this Period

1	2	0	0	0	0	0	0	0	0
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Memo Item

Full Name (Last, First, Middle Initial)

**B. Siddiqui, Wamia, , ,**

Mailing Address 194 Major Road

City  
South Brunswick

State  
NJ

Zip Code  
08852

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

WHITESIDES, GEORGE, , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: CA District: 27

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	3		2	0	2	4

FEC Identification Number

**C** H4CA27111

**Transaction ID : SB23.45627**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
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Memo Item

Full Name (Last, First, Middle Initial)

**C. Singh, Jessica, , ,**

Mailing Address 4815 Pennel Ct.

City  
Stockton

State  
CA

Zip Code  
95206

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

GRAY, ADAM C., , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: CA District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	9		2	0	2	4

FEC Identification Number

**C** H2CA13115

**Transaction ID : SB23.45758**

Amount of Each Disbursement this Period

1	2	0	0	0	0	0	0	0	0
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Memo Item

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

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

3	4	0	0	0	0	0	0	0	0
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Smith, Ryan R., , ,**

Mailing Address 13444 Silver Stirrup Dr

City  
Corona

State  
CA

Zip Code  
92883

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

ROLLINS, WILL, , ,

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: CA District: 41

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			13			2024			

FEC Identification Number

**C** H2CA42205

**Transaction ID : SB23.45644**

Amount of Each Disbursement this Period

50.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Stanley, Juanita L., , ,**

Mailing Address PO BOX 364

City  
Pima

State  
AZ

Zip Code  
85543

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

DCCC

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
11			15			2024			

FEC Identification Number

**C** C00000935

**Transaction ID : SB23.45685**

Amount of Each Disbursement this Period

200.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Suarez, Mary, , ,**

Mailing Address 1009 Beesons Field Dr  
Drive

City  
Kernersville

State  
NC

Zip Code  
27284

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

TRAN, DEREK, , ,

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: CA District: 45

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			13			2024			

FEC Identification Number

**C** H4CA45170

**Transaction ID : SB23.45573**

Amount of Each Disbursement this Period

200.00

Memo Item

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

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

450.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Suarez, Patrick, , ,**

Mailing Address 1009 Beesons Field Dr

City  
Kernersville

State  
NC

Zip Code  
27284

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

WHITESIDES, GEORGE, , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: CA District: 27

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	3		2	0	2	4

FEC Identification Number

**C** H4CA27111

**Transaction ID : SB23.45511**

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0

Memo Item

Full Name (Last, First, Middle Initial)

**B. Tam, Nelson, , ,**

Mailing Address 2621 MacArthur Boulevard

City  
Oakland

State  
CA

Zip Code  
94602

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

DCCC

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	9		2	0	2	4

FEC Identification Number

**C** C00000935

**Transaction ID : SB23.45762**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0

Memo Item

Full Name (Last, First, Middle Initial)

**C. Tam, Nelson, , ,**

Mailing Address 2621 MacArthur Boulevard

City  
Oakland

State  
CA

Zip Code  
94602

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

GALLEGO, RUBEN, , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: AZ District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	9		2	0	2	4

FEC Identification Number

**C** S4AZ00139

**Transaction ID : SB23.45763**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0

Memo Item

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

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

4	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0


SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

Grid for line numbers 21b-30b with checkboxes, where 23 is checked.

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

Form A: Taylor, Shaniya, , , including fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount.

Form B: Thomas, Pauletta, , , including fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount.

Form C: Truss, Haley, , , including fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount.

SUBTOTAL of Disbursements This Page (optional) 450.00
TOTAL This Period (last page this line number only)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Tufail, Sidrah, , ,**

Mailing Address 11763 college park trail

City Orlando State FL Zip Code 32826

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

WHITESIDES, GEORGE, , ,

Office Sought:  House  Senate  President

Disbursement For: 2024  Primary  General  Other (specify) ▼

State: CA District: 27

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			13			2024					

FEC Identification Number

**C** H4CA27111

**Transaction ID : SB23.45509**

Amount of Each Disbursement this Period

200.00
--------

Memo Item

Full Name (Last, First, Middle Initial)

**B. Udensi, David C., , ,**

Mailing Address 6320 Main Street

City Houston State TX Zip Code 77005

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

GALLEGO, RUBEN, , ,

Office Sought:  House  Senate  President

Disbursement For: 2024  Primary  General  Other (specify) ▼

State: AZ District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			13			2024					

FEC Identification Number

**C** S4AZ00139

**Transaction ID : SB23.45542**

Amount of Each Disbursement this Period

40.00
-------

Memo Item

Full Name (Last, First, Middle Initial)

**C. Valdez Monroy, Jacqueline, , ,**

Mailing Address 7428 Kraft Avenue

City North Hollywood State CA Zip Code 91605

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

TRAN, DEREK, , ,

Office Sought:  House  Senate  President

Disbursement For: 2024  Primary  General  Other (specify) ▼

State: CA District: 45

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			14			2024					

FEC Identification Number

**C** H4CA45170

**Transaction ID : SB23.45649**

Amount of Each Disbursement this Period

200.00
--------

Memo Item

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

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

440.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Vasquez, Arantza S., , ,**

Mailing Address 1309 Sterling Ave

City  
Joliet

State  
IL

Zip Code  
60432

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

WHITESIDES, GEORGE, , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: CA District: 27

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	3		2	0	2	4

FEC Identification Number

**C** H4CA27111

**Transaction ID : SB23.45514**

Amount of Each Disbursement this Period

40.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Vengrin, Charlotte M, , ,**

Mailing Address 111 Oxford Street

City  
Chevy Chase

State  
MD

Zip Code  
20815

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

GRAY, ADAM C., , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify)

State: CA District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	8		2	0	2	4

FEC Identification Number

**C** H2CA13115

**Transaction ID : SB23.45744**

Amount of Each Disbursement this Period

200.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Verinder, Ella, , ,**

Mailing Address 76 Pond St

City  
Boston

State  
MA

Zip Code  
02130

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

WHITESIDES, GEORGE, , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: CA District: 27

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	3		2	0	2	4

FEC Identification Number

**C** H4CA27111

**Transaction ID : SB23.45623**

Amount of Each Disbursement this Period

60.00

Memo Item

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

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

300.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

### A. VERITAS PROGRESSIVES PAC

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			25			2024					

Mailing Address 59 SHEPARD ST  
BOX 137

FEC Identification Number

**C** C00682724

**Transaction ID : SB23.45173**

Amount of Each Disbursement this Period

4200.00

Memo Item

City CAMBRIDGE State MA Zip Code 02138

Purpose of Disbursement

Contribution

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

### B. Verlaque, Samantha, , ,

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			25			2024					

Mailing Address 28033 Memory Lane

FEC Identification Number

**C** H4CA27111

**Transaction ID : SB23.45177**

Amount of Each Disbursement this Period

70.00

Memo Item

City Valencia State CA Zip Code 91354

Purpose of Disbursement

Canvassing - In-Kind

Candidate Name

WHITESIDES, GEORGE, , ,

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify)

State: CA District: 27

Full Name (Last, First, Middle Initial)

### C. Verlaque, Samantha, , ,

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			13			2024					

Mailing Address 28033 Memory Lane

FEC Identification Number

**C** H4CA27111

**Transaction ID : SB23.45499**

Amount of Each Disbursement this Period

140.00

Memo Item

City Valencia State CA Zip Code 91354

Purpose of Disbursement

Canvassing - In-Kind

Candidate Name

WHITESIDES, GEORGE, , ,

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: CA District: 27

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

4410.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Walker, Star K., , ,**

Mailing Address 2501 Westridge St.  
Apt 239

City Houston State TX Zip Code 77054

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

WHITESIDES, GEORGE, , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: CA District: 27

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			13			2024			

FEC Identification Number

**C** H4CA27111

**Transaction ID : SB23.45503**

Amount of Each Disbursement this Period

200.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Walker, Stephon, , ,**

Mailing Address 2513 SE 14th Ave

City Homestead State FL Zip Code 33035

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

WHITESIDES, GEORGE, , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify)

State: CA District: 27

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			13			2024			

FEC Identification Number

**C** H4CA27111

**Transaction ID : SB23.45504**

Amount of Each Disbursement this Period

60.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Walker, Timothy J, , ,**

Mailing Address 3004 55th St

City Lubbock State TX Zip Code 79413

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

TRAN, DEREK, , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: CA District: 45

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			14			2024			

FEC Identification Number

**C** H4CA45170

**Transaction ID : SB23.45665**

Amount of Each Disbursement this Period

60.00

Memo Item

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

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

320.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Walker, Timothy J, , ,**

Mailing Address 3004 55th St

City  
Lubbock

State  
TX

Zip Code  
79413

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

GALLEGO, RUBEN, , ,

Office Sought:

 House  
 Senate  
 President

Disbursement For: 2024

 Primary  
 General  
 Other (specify) ▼

State: AZ

District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	4		2	0	2	4

FEC Identification Number

**C** S4AZ00139

**Transaction ID : SB23.45666**

Amount of Each Disbursement this Period

60.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Walker, Timothy J, , ,**

Mailing Address 3004 55th St

City  
Lubbock

State  
TX

Zip Code  
79413

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

CASEY, ROBERT P. JR., , ,

Office Sought:

 House  
 Senate  
 President

Disbursement For: 2022

 Primary  
 General  
 Other (specify) ▼

State: PA

District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	4		2	0	2	4

FEC Identification Number

**C** S6PA00217

**Transaction ID : SB23.45667**

Amount of Each Disbursement this Period

80.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Walsh, Denise, , ,**

Mailing Address 1502 Dominik Dr

City  
College Station

State  
TX

Zip Code  
77493

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

GALLEGO, RUBEN, , ,

Office Sought:

 House  
 Senate  
 President

Disbursement For: 2024

 Primary  
 General  
 Other (specify) ▼

State: AZ

District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	3		2	0	2	4

FEC Identification Number

**C** S4AZ00139

**Transaction ID : SB23.45547**

Amount of Each Disbursement this Period

20.00

Memo Item

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

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

160.00

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)

Grid for line numbers 21b-30b with checkboxes, where 23 is checked.

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

Form A: Wegener, Kaili L, , , including fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

Form B: Xia, Maggie, , , including fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

Form C: Xiong, Angela, , , including fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

SUBTOTAL of Disbursements This Page (optional) 420.00
TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Yadav, Tisyaa, , ,**

Mailing Address 1601 Rive Blvd

City  
Houston

State  
TX

Zip Code  
77005

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

GALLEGO, RUBEN, , ,

Office Sought:

 House  
 Senate  
 President

Disbursement For: 2024

 Primary  
 General  
 Other (specify) ▼

State: AZ

District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	3		2	0	2	4

FEC Identification Number

**C** S4AZ00139

**Transaction ID : SB23.45540**

Amount of Each Disbursement this Period

40.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Yang, Amaris, , ,**

Mailing Address 2033 Legacy Ln.

City  
Chino Hills

State  
CA

Zip Code  
91709

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

GRAY, ADAM C., , ,

Office Sought:

 House  
 Senate  
 President

Disbursement For: 2024

 Primary  
 General  
 Other (specify) ▼

State: CA

District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	8		2	0	2	4

FEC Identification Number

**C** H2CA13115

**Transaction ID : SB23.45730**

Amount of Each Disbursement this Period

80.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Yang, Calvin, , ,**

Mailing Address 2580 Bancroft Way  
Unit 316

City  
Berkeley

State  
CA

Zip Code  
94704

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

GRAY, ADAM C., , ,

Office Sought:

 House  
 Senate  
 President

Disbursement For: 2024

 Primary  
 General  
 Other (specify) ▼

State: CA

District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	5		2	0	2	4

FEC Identification Number

**C** H2CA13115

**Transaction ID : SB23.45718**

Amount of Each Disbursement this Period

200.00

Memo Item

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

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

320.00

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)

Form for line numbers 21b-30b with checkboxes, where 23 is checked.

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

Form A: Disbursement for Young, Emma C., including fields for name, address, date, FEC ID, and amount.

Form B: Disbursement for Young, Nicole, including fields for name, address, date, FEC ID, and amount.

Form C: Disbursement for Zimbabwe, Jay N., including fields for name, address, date, FEC ID, and amount.

SUBTOTAL of Disbursements This Page (optional) 320.00
TOTAL This Period (last page this line number only)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Zwebti, Rami, , ,**

Mailing Address 6765 E Robinson Ave.

City  
Fresno

State  
CA

Zip Code  
93727

Purpose of Disbursement

Ballot Curing - In-Kind

Candidate Name

GRAY, ADAM C., , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: CA District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	5		2	0	2	4

FEC Identification Number

**C** H2CA13115

**Transaction ID : SB23.45715**

Amount of Each Disbursement this Period

180.00

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

Disbursement For:  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	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

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	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)..... ▶

180.00

26400.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Adams, Sivan M., , ,**

Mailing Address 415 South Street  
MB 1492

City  
Waltham

State  
MA

Zip Code  
02453

Purpose of Disbursement  
Strategic Consulting - IE Only Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			07			2024			

FEC Identification Number

**C**

**Transaction ID : SB29.45101**

Amount of Each Disbursement this Period

200.00
--------

Memo Item

Full Name (Last, First, Middle Initial)

**B. Adams, Sivan M., , ,**

Mailing Address 415 South Street  
MB 1492

City  
Waltham

State  
MA

Zip Code  
02453

Purpose of Disbursement  
Strategic Consulting - IE Only Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			08			2024			

FEC Identification Number

**C**

**Transaction ID : SB29.45105**

Amount of Each Disbursement this Period

20.00
-------

Memo Item

Full Name (Last, First, Middle Initial)

**C. Aggarwal, amiya, , ,**

Mailing Address 12525 E Altadena Ave.

City  
Scottsdale

State  
AZ

Zip Code  
85259

Purpose of Disbursement  
Strategic Consulting - IE Only Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			07			2024			

FEC Identification Number

**C**

**Transaction ID : SB29.45100**

Amount of Each Disbursement this Period

200.00
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Memo Item

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

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

420.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Aggarwal, amiya, , ,**

Mailing Address 12525 E Altadena Ave.

City Scottsdale State AZ Zip Code 85259

Purpose of Disbursement  
Strategic Consulting - IE Only Account

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			08			2024			

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB29.45107**

Amount of Each Disbursement this Period

[Redacted]	11.00
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Memo Item

Full Name (Last, First, Middle Initial)

**B. Banks, Audrey E., , ,**

Mailing Address 1959 E St. NW #405

City Washington State DC Zip Code 20052

Purpose of Disbursement  
Strategic Consulting - IE Only Account

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			07			2024			

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB29.45103**

Amount of Each Disbursement this Period

[Redacted]	50.00
------------	-------

Memo Item

Full Name (Last, First, Middle Initial)

**C. Barnes, Jocelyn, , ,**

Mailing Address PO Box 115

City Leggett State TX Zip Code 77350

Purpose of Disbursement  
Strategic Consulting - IE Only Account

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			04			2024			

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB29.45084**

Amount of Each Disbursement this Period

[Redacted]	300.00
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Memo Item

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

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

[Redacted]	361.00
------------	--------

[Redacted]	
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Bill.com**

Mailing Address 6220 America Center Drive  
Suite 100

City San Jose State CA Zip Code 95002

Purpose of Disbursement  
Payment Processing Fee - IE Only Account

Candidate Name

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

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			18			2024			

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB29.44926**

Amount of Each Disbursement this Period

[Redacted] 333.91

Memo Item

Full Name (Last, First, Middle Initial)

**B. Bill.com**

Mailing Address 6220 America Center Drive  
Suite 100

City San Jose State CA Zip Code 95002

Purpose of Disbursement  
Payment Processing Fee - IE Only Account

Candidate Name

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

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			19			2024			

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB29.45127**

Amount of Each Disbursement this Period

[Redacted] 344.24

Memo Item

Full Name (Last, First, Middle Initial)

**C. Blue Action Nevada**

Mailing Address

City State Zip Code

Purpose of Disbursement  
Donation - IE Only Account

Candidate Name

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

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			13			2024			

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB29.45119**

Amount of Each Disbursement this Period

[Redacted] 300.00

Memo Item

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

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

[Redacted] 978.15

[Redacted]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Fiore, Anthony, , ,**

Mailing Address 2516 Jacob Drive

City  
Sinking Spring

State  
PA

Zip Code  
19608

Purpose of Disbursement  
Strategic Consulting - IE Only Account

Candidate Name

Office Sought:

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

Disbursement For:

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			04			2024			

FEC Identification Number

**C**

**Transaction ID : SB29.45070**

Amount of Each Disbursement this Period

400.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Gupta, Yajat, , ,**

Mailing Address 188 Magnolia Drive

City  
Chester Springs

State  
PA

Zip Code  
19425

Purpose of Disbursement  
Strategic Consulting - IE Only Account

Candidate Name

Office Sought:

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

Disbursement For:

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			07			2024			

FEC Identification Number

**C**

**Transaction ID : SB29.45102**

Amount of Each Disbursement this Period

100.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Guthman, Nick, , ,**

Mailing Address 10913 Lindblade St.

City  
Culver City

State  
CA

Zip Code  
90230

Purpose of Disbursement  
Payroll - IE Only Account

Candidate Name

Office Sought:

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

Disbursement For:

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			23			2024			

FEC Identification Number

**C**

**Transaction ID : SB29.44955**

Amount of Each Disbursement this Period

2000.00

Memo Item

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

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

2500.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Guthman, Nick, , ,**

Mailing Address 10913 Lindblade St.

City Culver City State CA Zip Code 90230

Purpose of Disbursement  
Postage - IE Ony Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 25 / 2024

FEC Identification Number

C [ ]

Transaction ID : SB29.45128

Amount of Each Disbursement this Period

[ ] 294.60

Memo Item

Full Name (Last, First, Middle Initial)

**B. United States Postal Service**

Mailing Address 9942 Culver Blvd.

City Culver City State CA Zip Code 90232

Purpose of Disbursement  
Postage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 25 / 2024

FEC Identification Number

C [ ]

Transaction ID : SB29.45128.0

Amount of Each Disbursement this Period

[ ] 294.60

Memo Item

Full Name (Last, First, Middle Initial)

**C. Guthman, Nick, , ,**

Mailing Address 10913 Lindblade St.

City Culver City State CA Zip Code 90230

Purpose of Disbursement  
Food - IE Ony Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 25 / 2024

FEC Identification Number

C [ ]

Transaction ID : SB29.45131

Amount of Each Disbursement this Period

[ ] 217.00

Memo Item

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

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

[ ] 511.60

[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Le Diplomate**

Mailing Address 1601 14th St NW

City  
Washington

State  
DC

Zip Code  
20009

Purpose of Disbursement

Food

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
1	1		2	5		2	0	2	4

FEC Identification Number

C [ ]

**Transaction ID : SB29.45131.0**

Amount of Each Disbursement this Period

[ ] 217.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Guthman, Nick, , ,**

Mailing Address 10913 Lindblade St.

City  
Culver City

State  
CA

Zip Code  
90230

Purpose of Disbursement

Payroll - IE Ony 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
1	1		2	5		2	0	2	4

FEC Identification Number

C [ ]

**Transaction ID : SB29.45135**

Amount of Each Disbursement this Period

[ ] 2000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. High School Democrats of America**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Donation - IE Ony 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
1	1		1	3		2	0	2	4

FEC Identification Number

C [ ]

**Transaction ID : SB29.45117**

Amount of Each Disbursement this Period

[ ] 800.00

Memo Item

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

[ ] 2800.00

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

[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Hogan, Ella, , ,**

Mailing Address 107 Robert Purcell  
2584 Clara Dickson Hall

City Ithaca State NY Zip Code 14853

Purpose of Disbursement  
Strategic Consulting - IE Only Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			04			2024			

FEC Identification Number

**C**

**Transaction ID : SB29.45086**

Amount of Each Disbursement this Period

300.00
--------

Memo Item

Full Name (Last, First, Middle Initial)

**B. Jennings, Davante, , ,**

Mailing Address 77 East Andrews Dr NW  
Unit 403

City Atlanta State GA Zip Code 30305

Purpose of Disbursement  
Strategic Consulting - IE Only Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			24			2024			

FEC Identification Number

**C**

**Transaction ID : SB29.44992**

Amount of Each Disbursement this Period

200.00
--------

Memo Item

Full Name (Last, First, Middle Initial)

**C. Kagan, Benjamin, , ,**

Mailing Address 6100 Main Street

City Houston State TX Zip Code 77005

Purpose of Disbursement  
Strategic Consulting - IE Only Account

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			04			2024			

FEC Identification Number

**C**

**Transaction ID : SB29.45068**

Amount of Each Disbursement this Period

400.00
--------

Memo Item

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

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

900.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Kelly, Ethan, , ,**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Strategic Consulting - IE Only Account

Candidate Name

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			17			2024			

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB29.44925**

Amount of Each Disbursement this Period

[Redacted] 600.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Latham-Stewart, Jonon, , ,**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Strategic Consulting - IE Only Account

Candidate Name

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			24			2024			

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB29.45001**

Amount of Each Disbursement this Period

[Redacted] 200.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Let's Roll Video Content LLC**

Mailing Address 909 Davis St.  
Suite 500

City

Evanston

State

IL

Zip Code

60201

Purpose of Disbursement

Video Production - IE Only Account

Candidate Name

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			22			2024			

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB29.44946**

Amount of Each Disbursement this Period

[Redacted] 5640.00

Memo Item

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

[Redacted] 6440.00

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

[Redacted]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Moreno, Victoria, , ,**

Mailing Address 120 Moose Club Drive

City  
Athens

State  
GA

Zip Code  
30606

Purpose of Disbursement  
Strategic Consulting - IE Only Account

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			3	0			2	0	2	4		

FEC Identification Number

**C**

**Transaction ID : SB29.45044**

Amount of Each Disbursement this Period

300.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Sabhnani, Anay, , ,**

Mailing Address 15231 Heather Stone Ct.

City  
San Diego

State  
CA

Zip Code  
92127

Purpose of Disbursement  
Strategic Consulting - IE Only Account

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	8			2	0	2	4		

FEC Identification Number

**C**

**Transaction ID : SB29.45104**

Amount of Each Disbursement this Period

45.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Stahr, Morgan, , ,**

Mailing Address 515 S Poplar St

City  
Hazleton

State  
PA

Zip Code  
18201

Purpose of Disbursement  
Payroll - IE Only Account

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	3			2	0	2	4		

FEC Identification Number

**C**

**Transaction ID : SB29.44954**

Amount of Each Disbursement this Period

2000.00

Memo Item

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

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

2345.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Stahr, Morgan, , ,**

Mailing Address 515 S Poplar St

City  
Hazleton

State  
PA

Zip Code  
18201

Purpose of Disbursement

Payroll - IE Ony 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
1	1		2	5		2	0	2	4

FEC Identification Number

C [REDACTED]

**Transaction ID : SB29.45134**

Amount of Each Disbursement this Period

[REDACTED]	2000.00
------------	---------

Memo Item

Full Name (Last, First, Middle Initial)

**B. SWING LEFT**

Mailing Address 700 13TH STREET NW, SUITE 600

City  
WASHINGTON

State  
DC

Zip Code  
20005

Purpose of Disbursement

Contribution - IE Only 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
1	0		2	1		2	0	2	4

FEC Identification Number

C C00632133

**Transaction ID : SB29.44928**

Amount of Each Disbursement this Period

[REDACTED]	500.00
------------	--------

Memo Item

Full Name (Last, First, Middle Initial)

**C. Unfiltered Media LLC**

Mailing Address 2663 Manhattan Place  
#102

City  
Vienna

State  
VA

Zip Code  
22180

Purpose of Disbursement

Payroll Processing - IE Only 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
1	0		2	3		2	0	2	4

FEC Identification Number

C [REDACTED]

**Transaction ID : SB29.44956**

Amount of Each Disbursement this Period

[REDACTED]	200.00
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Memo Item

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

[REDACTED]	2700.00
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**TOTAL** This Period (last page this line number only)..... ▶

[REDACTED]	
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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Vasiloglou, Ismini K., , ,**

Mailing Address 1938 Volberg str.

City  
Atlanta

State  
GA

Zip Code  
30318

Purpose of Disbursement  
Strategic Consulting - IE Only Account

Candidate Name

Office Sought:

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

Disbursement For:

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	8		2	0	2	4

FEC Identification Number

**C**

**Transaction ID : SB29.45108**

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

**B. Volunteer Recruitment Strategies LLC**

Mailing Address 4305 NE 74th Ave

City  
Portland

State  
OR

Zip Code  
97218

Purpose of Disbursement  
Strategic Consulting - IE Ony Account

Candidate Name

Office Sought:

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

Disbursement For:

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	1		2	0	2	4

FEC Identification Number

**C**

**Transaction ID : SB29.44929**

Amount of Each Disbursement this Period

1	3	9	6	2	7	5	0	0	0
---	---	---	---	---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

**C. Volunteer Recruitment Strategies LLC**

Mailing Address 4305 NE 74th Ave

City  
Portland

State  
OR

Zip Code  
97218

Purpose of Disbursement  
Strategic Consulting - IE Ony Account

Candidate Name

Office Sought:

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

Disbursement For:

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	2	4

FEC Identification Number

**C**

**Transaction ID : SB29.45061**

Amount of Each Disbursement this Period

1	9	0	2	3	7	5	0	0	0
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Memo Item

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

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

3	2	9	8	8	5	0	0	0	0
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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

### A. Volunteer Recruitment Strategies LLC

Mailing Address 4305 NE 74th Ave

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	4		2	0	2	4

City  
Portland

State  
OR

Zip Code  
97218

FEC Identification Number

C [ ]

Transaction ID : SB29.45076

Amount of Each Disbursement this Period

[ ] 20000.00

Memo Item

Purpose of Disbursement  
Strategic Consulting - IE Ony Account

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

### B. Waram, Mintra, , ,

Mailing Address 8072 E Mercer Ln.

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	8		2	0	2	4

City  
Scottsdale

State  
AZ

Zip Code  
85260

FEC Identification Number

C [ ]

Transaction ID : SB29.45106

Amount of Each Disbursement this Period

[ ] 13.00

Memo Item

Purpose of Disbursement  
Strategic Consulting - IE Only Account

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

### C.

Mailing Address

Date of Disbursement

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

City

State

Zip Code

FEC Identification Number

C [ ]

Amount of Each Disbursement this Period

[ ]

Memo Item

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

[ ] 20013.00

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

[ ] 72957.25