

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**  
**YOUTH PROGRESSIVE ACTION CATALYST**

ADDRESS (number and street) **1250 I STREET NW**  
**SUITE 330**  
 Check if different than previously reported. (ACC) **WASHINGTON DC 20005**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00670216** 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:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period  /  /  2022 through  /  /  2022

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Guthman, Nick, , ,  
Type or Print Name of Treasurer

Signature of Treasurer Guthman, Nick, , , [Electronically Filed] Date  /  /  2022

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

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="2022"/>	<input type="text" value="37563.31"/>	<input type="text" value="37563.31"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="190326.69"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="44887.82"/>	<input type="text" value="352397.36"/>
(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="235214.51"/>	<input type="text" value="389960.67"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="108085.64"/>	<input type="text" value="262831.80"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="127128.87"/>	<input type="text" value="127128.87"/>
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:**

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

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

## DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**YOUTH PROGRESSIVE ACTION CATALYST**

Report Covering the Period: From: M M / D D / Y Y Y Y 04 / 01 / 2022 To: M M / D D / Y Y Y Y 06 / 30 / 2022

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	11864.00	28192.00
(ii) Unitemized .....	31320.70	72499.16
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	43184.70	100691.16
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	43184.70	100691.16
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).....	1700.00	1700.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	3.12	250006.20
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	44887.82	352397.36
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	44887.82	352397.36

**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 .....	41989.60	94982.72
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	41989.60	94982.72
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	66096.04	167849.08
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)) ..	108085.64	262831.80
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	108085.64	262831.80

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

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) .....	43184.70	100691.16
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	43184.70	100691.16
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	41989.60	94982.72
37. Offsets to Operating Expenditures (from Line 15, page 3).....	1700.00	1700.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	40289.60	93282.72

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 74
	<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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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. Anderson, Samuel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 159 Viburnum Way  
 City Carrboro State NC Zip Code 27510  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) not employed Occupation (for Individual) Homemaker  
 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  
 04 / 27 / 2022  
**Transaction ID : SA11AI.30998**  
 Amount of Each Receipt this Period  
 20.00  
 Memo Item

**B. Anderson, Samuel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 159 Viburnum Way  
 City Carrboro State NC Zip Code 27510  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) not employed Occupation (for Individual) Homemaker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 08 / 2022  
**Transaction ID : SA11AI.30999**  
 Amount of Each Receipt this Period  
 35.00  
 Memo Item

**C. Anderson, Samuel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 159 Viburnum Way  
 City Carrboro State NC Zip Code 27510  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) not employed Occupation (for Individual) Homemaker  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 27 / 2022  
**Transaction ID : SA11AI.31000**  
 Amount of Each Receipt this Period  
 20.00  
 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: PAGE 7 OF 74  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. Anderson, Samuel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 159 Viburnum Way  
 City Carrboro State NC Zip Code 27510  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) not employed Occupation (for Individual) Homemaker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 06 / 08 / 2022  
**Transaction ID : SA11AI.31001**  
 Amount of Each Receipt this Period 35.00  
 Memo Item

**B. Anderson, Samuel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 159 Viburnum Way  
 City Carrboro State NC Zip Code 27510  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) not employed Occupation (for Individual) Homemaker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 06 / 27 / 2022  
**Transaction ID : SA11AI.31002**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. Beck, Stefanie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1701 S Flagler Dr Apt 1407  
 City West Palm Beach State FL Zip Code 33401  
 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 05 / 30 / 2022  
**Transaction ID : SA11AI.31024**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 105.00  
**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 8 OF 74
<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. Beck, Stefanie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1701 S Flagler Dr Apt 1407  
 City West Palm Beach State FL Zip Code 33401  
 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 **06 / 07 / 2022**  
**Transaction ID : SA11AI.31025**  
 Amount of Each Receipt this Period 25.00  
 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 ▼ 250.00

Date of Receipt **05 / 13 / 2022**  
**Transaction ID : SA11AI.31051**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. 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 ▼ 300.00

Date of Receipt **06 / 13 / 2022**  
**Transaction ID : SA11AI.31052**  
 Amount of Each Receipt this Period 50.00  
 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 9 OF 74
<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. Castanares, Jana, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 143

City Mount Hood Parkdale	State OR	Zip Code 97041
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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 ▼  
240.00

Date of Receipt  

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

**Transaction ID : SA11AI.31111**

Amount of Each Receipt this Period  
40.00

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
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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 ▼  
1145.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	12	/	2022

**Transaction ID : SA11AI.31133**

Amount of Each Receipt this Period  
45.00

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
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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 ▼  
1295.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	17	/	2022

**Transaction ID : SA11AI.31134**

Amount of Each Receipt this Period  
150.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	235.00
<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 74
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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. Cohen, Naomi, , ,**

Mailing Address **POB 39**

City <b>Gap Mills</b>	State <b>WV</b>	Zip Code <b>24941</b>
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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 ▼  
**1455.00**

Date of Receipt  
**06 / 06 / 2022**

**Transaction ID : SA11AI.31135**

Amount of Each Receipt this Period  
**160.00**

Memo Item

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

Mailing Address **61 west 62nd street apt 7 JK**

City <b>New york</b>	State <b>NY</b>	Zip Code <b>10023</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) <b>Mt Sinai Hospital</b>	Occupation (for Individual) <b>Physician</b>
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**420.00**

Date of Receipt  
**04 / 08 / 2022**

**Transaction ID : SA11AI.31161**

Amount of Each Receipt this Period  
**420.00**

Memo Item

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

Mailing Address **4420 n. clybourn**

City <b>burbank</b>	State <b>CA</b>	Zip Code <b>91505</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) <b>self</b>	Occupation (for Individual) <b>writer</b>
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
**250.00**

Date of Receipt  
**04 / 25 / 2022**

**Transaction ID : SA11AI.31168**

Amount of Each Receipt this Period  
**50.00**

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>630.00</b>
<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 74
	<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. 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
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 775.00

Date of Receipt  
 04 / 15 / 2022  
**Transaction ID : SA11AI.31180**

Amount of Each Receipt this Period  
 25.00

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
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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 ▼  
 800.00

Date of Receipt  
 05 / 15 / 2022  
**Transaction ID : SA11AI.31181**

Amount of Each Receipt this Period  
 25.00

Memo Item

**C. 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
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
 1050.00

Date of Receipt  
 06 / 03 / 2022  
**Transaction ID : SA11AI.31182**

Amount of Each Receipt this Period  
 250.00

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:	PAGE 12 OF 74
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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. 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 **1075.00**

Date of Receipt **06 / 15 / 2022**  
**Transaction ID : SA11AI.31183**  
 Amount of Each Receipt this Period **25.00**  
 Memo Item

**B. Fluhner, 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 **452.00**

Date of Receipt **05 / 28 / 2022**  
**Transaction ID : SA11AI.31207**  
 Amount of Each Receipt this Period **100.00**  
 Memo Item

**C. Fluhner, 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 **702.00**

Date of Receipt **06 / 30 / 2022**  
**Transaction ID : SA11AI.31208**  
 Amount of Each Receipt this Period **250.00**  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>375.00</b>
<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 13 OF 74
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<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. Green, Gail and Bill, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1604 Atherton Way  
 City Salinas State CA Zip Code 93906  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 18 / 2022  
**Transaction ID : SA11AI.31251**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**B. Green, Gail and Bill, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1604 Atherton Way  
 City Salinas State CA Zip Code 93906  
 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 ▼ 245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 12 / 2022  
**Transaction ID : SA11AI.31252**  
 Amount of Each Receipt this Period  
 20.00  
 Memo Item

**C. Green, Gail and Bill, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1604 Atherton Way  
 City Salinas State CA Zip Code 93906  
 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  
 06 / 18 / 2022  
**Transaction ID : SA11AI.31253**  
 Amount of Each Receipt this Period  
 25.00  
 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:	PAGE 14 OF 74
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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. Greenway, Lumina, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 17 Camden court  
 City Wakefield State RI Zip Code 02879  
 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 ▼ 473.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 09 / 2022  
**Transaction ID : SA11AI.31256**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**B. Greenway, Lumina, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 17 Camden court  
 City Wakefield State RI Zip Code 02879  
 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 ▼ 508.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 16 / 2022  
**Transaction ID : SA11AI.31257**  
 Amount of Each Receipt this Period  
 35.00  
 Memo Item

**C. Greenway, Lumina, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 17 Camden court  
 City Wakefield State RI Zip Code 02879  
 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 ▼ 548.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 26 / 2022  
**Transaction ID : SA11AI.31258**  
 Amount of Each Receipt this Period  
 40.00  
 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: PAGE 15 OF 74  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. Greenway, Lumina, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 17 Camden court  
 City Wakefield State RI Zip Code 02879  
 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 ▼ 573.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 09 / 2022  
**Transaction ID : SA11AI.31259**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**B. Greenway, Lumina, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 17 Camden court  
 City Wakefield State RI Zip Code 02879  
 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 ▼ 608.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 16 / 2022  
**Transaction ID : SA11AI.31260**  
 Amount of Each Receipt this Period  
 35.00  
 Memo Item

**C. Grumbach, Antonia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 300 Central Park West  
 City New York State NY Zip Code 10024  
 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  
 06 / 17 / 2022  
**Transaction ID : SA11AI.31266**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 310.00  
**TOTAL** This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 16 OF 74
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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. Hardin, Ray, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 650 Huntington Avenue #8F  
 City Boston State MA Zip Code 02115-5914  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Massachusetts Inst. of Technology Occupation (for Individual) Administrative Assistant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 05 / 25 / 2022  
**Transaction ID : SA11AI.31271**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. Harris, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 922 Timberline Drive  
 City Brookings State OR Zip Code 97415  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AMS Dataserfs Occupation (for Individual) engineer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 18 / 2022  
**Transaction ID : SA11AI.31274**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. Hoyt, Ivan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2001 Manorview Cir NW  
 City Salem State OR Zip Code 97304  
 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 04 / 16 / 2022  
**Transaction ID : SA11AI.31287**  
 Amount of Each Receipt this Period 100.00  
 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 17 OF 74
	<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. Hoyt, Ivan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2001 Manorview Cir NW  
 City Salem State OR Zip Code 97304  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 16 / 2022  
**Transaction ID : SA11AI.31288**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**B. Hoyt, Ivan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2001 Manorview Cir NW  
 City Salem State OR Zip Code 97304  
 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 ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 16 / 2022  
**Transaction ID : SA11AI.31289**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**C. Jauert, Diane, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1189 141st St.  
 City Luverne State MN Zip Code 56156  
 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  
 06 / 06 / 2022  
**Transaction ID : SA11AI.31303**  
 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 18 OF 74
	<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. Kause, Suzanne, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 410 Willow Place

City Pittsburgh	State PA	Zip Code 15218
--------------------	-------------	-------------------

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

Name of Employer (for Individual) UPMC healthplan	Occupation (for Individual) Medical director
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	14	/	2022

**Transaction ID : SA11AI.31324**

Amount of Each Receipt this Period  
40.00

Memo Item

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

Mailing Address 410 Willow Place

City Pittsburgh	State PA	Zip Code 15218
--------------------	-------------	-------------------

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

Name of Employer (for Individual) UPMC healthplan	Occupation (for Individual) Medical director
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
280.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	27	/	2022

**Transaction ID : SA11AI.31325**

Amount of Each Receipt this Period  
40.00

Memo Item

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

Mailing Address 410 Willow Place

City Pittsburgh	State PA	Zip Code 15218
--------------------	-------------	-------------------

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

Name of Employer (for Individual) UPMC healthplan	Occupation (for Individual) Medical director
--	---

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
06	/	18	/	2022

**Transaction ID : SA11AI.31326**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	130.00
<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 19 OF 74
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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. Kause, Suzanne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 410 Willow Place  
 City Pittsburgh State PA Zip Code 15218  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) UPMC healthplan Occupation (for Individual) Medical director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 06 / 25 / 2022  
**Transaction ID : SA11AI.31327**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Korzenik, Debi, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 176 West 87th Street  
 City New York State NY Zip Code 10024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MSHS inc Occupation (for Individual) In-house  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 04 / 22 / 2022  
**Transaction ID : SA11AI.31343**  
 Amount of Each Receipt this Period 210.00  
 Memo Item

**C. langen, frank, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 36 Haldeman Road  
 City santa monica State CA Zip Code 90402  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DPP Occupation (for Individual) realtor  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 13 / 2022  
**Transaction ID : SA11AI.31351**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1260.00
<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 74
	<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. Levin, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 24 W. Erie St. Apt. 2  
 City Chicago State IL Zip Code 60654  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Levin Schreder & Carey Ltd Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 04 / 30 / 2022  
**Transaction ID : SA11AI.31374**  
 Amount of Each Receipt this Period 150.00  
 Memo Item

**B. Levin, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 24 W. Erie St. Apt. 2  
 City Chicago State IL Zip Code 60654  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Levin Schreder & Carey Ltd Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 05 / 30 / 2022  
**Transaction ID : SA11AI.31375**  
 Amount of Each Receipt this Period 150.00  
 Memo Item

**C. Levin, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 24 W. Erie St. Apt. 2  
 City Chicago State IL Zip Code 60654  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Levin Schreder & Carey Ltd Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 06 / 30 / 2022  
**Transaction ID : SA11AI.31376**  
 Amount of Each Receipt this Period 150.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	450.00
<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 74
	<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. 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 ▼ 250.00

Date of Receipt 05 / 13 / 2022  
**Transaction ID : SA11AI.31379**  
 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 ▼ 300.00

Date of Receipt 06 / 13 / 2022  
**Transaction ID : SA11AI.31380**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. 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 ▼ 425.00

Date of Receipt 04 / 17 / 2022  
**Transaction ID : SA11AI.31418**  
 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 22 OF 74
	<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. 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 ▼ 475.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 17 / 2022  
**Transaction ID : SA11AI.31419**  
 Amount of Each Receipt this Period  
 50.00  
 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 ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 24 / 2022  
**Transaction ID : SA11AI.31420**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**C. 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 ▼ 550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 11 / 2022  
**Transaction ID : SA11AI.31421**  
 Amount of Each Receipt this Period  
 50.00  
 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:	PAGE 23 OF 74
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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. 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 ▼  
600.00

Date of Receipt  

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

**Transaction ID : SA11AI.31422**

Amount of Each Receipt this Period  
50.00

Memo Item

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

Mailing Address 108 Brook Rd

City Pittsford	State NY	Zip Code 14534
-------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		07		2022

**Transaction ID : SA11AI.31456**

Amount of Each Receipt this Period  
50.00

Memo Item

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

Mailing Address 108 Brook Rd

City Pittsford	State NY	Zip Code 14534
-------------------	-------------	-------------------

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

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

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
06		07		2022

**Transaction ID : SA11AI.31457**

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:	PAGE 24 OF 74
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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. 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 ▼ 205.00

Date of Receipt 06 / 16 / 2022  
**Transaction ID : SA11Al.31462**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. 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 ▼ 235.00

Date of Receipt 06 / 28 / 2022  
**Transaction ID : SA11Al.31463**  
 Amount of Each Receipt this Period 30.00  
 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 ▼ 400.00

Date of Receipt 04 / 11 / 2022  
**Transaction ID : SA11Al.31474**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	80.00
<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 74
	<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 ▼ 425.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 11 / 2022  
**Transaction ID : SA11Al.31475**  
 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 ▼ 525.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 14 / 2022  
**Transaction ID : SA11Al.31476**  
 Amount of Each Receipt this Period  
 100.00  
 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 ▼ 550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 11 / 2022  
**Transaction ID : SA11Al.31477**  
 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:	PAGE 26 OF 74
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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. Overs, Mark, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address N56 W21414 Silver Spring Dr.

City Menomonee Falls	State WI	Zip Code 53051
-------------------------	-------------	-------------------

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
06		09		2022

**Transaction ID : SA11AI.31485**

Amount of Each Receipt this Period  
50.00

Memo Item

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

Mailing Address 171 Main St. #253

City LOS ALTOS	State CA	Zip Code 94022
-------------------	-------------	-------------------

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 ▼  
4000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2022

**Transaction ID : SA11AI.31487**

Amount of Each Receipt this Period  
4000.00

Memo Item

**C. 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 ▼  
225.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		01		2022

**Transaction ID : SA11AI.31490**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4075.00
<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 27 OF 74
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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. 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 ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 01 / 2022  
**Transaction ID : SA11AI.31491**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**B. 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  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 01 / 2022  
**Transaction ID : SA11AI.31492**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**C. PETROVICH, SUSAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 100 LA VUELTA ROAD  
 City MONTECITO State CA Zip Code 93108  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Brownstein Hyatt Farber Schreck Occupation (for Individual) Attorney at Law  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 12 / 2022  
**Transaction ID : SA11AI.31519**  
 Amount of Each Receipt this Period  
 100.00  
 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 28 OF 74
<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. Resnikoff, Rachel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26 Tunnel Road  
 City Berkeley State CA Zip Code 94705  
 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 ▼ 210.00

Date of Receipt **05 / 12 / 2022**  
**Transaction ID : SA11AI.31546**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Resnikoff, Rachel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26 Tunnel Road  
 City Berkeley State CA Zip Code 94705  
 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 ▼ 310.00

Date of Receipt **05 / 12 / 2022**  
**Transaction ID : SA11AI.31547**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. Resnikoff, Rachel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26 Tunnel Road  
 City Berkeley State CA Zip Code 94705  
 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 ▼ 360.00

Date of Receipt **05 / 13 / 2022**  
**Transaction ID : SA11AI.31548**  
 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 29 OF 74
	<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. Resnikoff, Rachel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26 Tunnel Road  
 City Berkeley State CA Zip Code 94705  
 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 ▼ 377.00

Date of Receipt 05 / 20 / 2022  
**Transaction ID : SA11AI.31549**  
 Amount of Each Receipt this Period 17.00  
 Memo Item

**B. Resnikoff, Rachel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26 Tunnel Road  
 City Berkeley State CA Zip Code 94705  
 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 ▼ 427.00

Date of Receipt 06 / 13 / 2022  
**Transaction ID : SA11AI.31550**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Resnikoff, Rachel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26 Tunnel Road  
 City Berkeley State CA Zip Code 94705  
 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 ▼ 444.00

Date of Receipt 06 / 20 / 2022  
**Transaction ID : SA11AI.31551**  
 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 30 OF 74
	<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. Richerson, Peter J, , ,</b>		Date of Receipt
Mailing Address 210 Full Circle		<input type="text" value="04"/> / <input type="text" value="14"/> / <input type="text" value="2022"/>
City Davis	State CA	Zip Code 95618
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.31555</b>
Name of Employer (for Individual) UC Davis		Occupation (for Individual) Retired
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="500.00"/>
<input type="text" value="500.00"/>		<input type="checkbox"/> Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Riecker, John, , ,</b>		Date of Receipt
Mailing Address P.O. Box 983		<input type="text" value="05"/> / <input type="text" value="17"/> / <input type="text" value="2022"/>
City Salado	State TX	Zip Code 76571
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.31557</b>
Name of Employer (for Individual) self		Occupation (for Individual) futures trader
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="30.00"/>
<input type="text" value="210.00"/>		<input type="checkbox"/> Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Riecker, John, , ,</b>		Date of Receipt
Mailing Address P.O. Box 983		<input type="text" value="06"/> / <input type="text" value="17"/> / <input type="text" value="2022"/>
City Salado	State TX	Zip Code 76571
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.31558</b>
Name of Employer (for Individual) self		Occupation (for Individual) futures trader
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="30.00"/>
<input type="text" value="240.00"/>		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="560.00"/>
<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 31 OF 74
	<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. 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 ▼ 475.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 02 / 2022  
**Transaction ID : SA11AI.31578**  
 Amount of Each Receipt this Period  
 100.00  
 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 ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 13 / 2022  
**Transaction ID : SA11AI.31579**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**C. 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  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 02 / 2022  
**Transaction ID : SA11AI.31580**  
 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 32 OF 74
	<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. 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  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 13 / 2022  
**Transaction ID : SA11AI.31581**  
 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 ▼ 575.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 02 / 2022  
**Transaction ID : SA11AI.31582**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**C. 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 ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 13 / 2022  
**Transaction ID : SA11AI.31583**  
 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: PAGE 33 OF 74  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. Schmidt, Annie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5309 Cameron Dr. NW  
 City Rochester State MN Zip Code 55901  
 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 06 / 16 / 2022  
**Transaction ID : SA11AI.31598**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Schmidt, Annie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5309 Cameron Dr. NW  
 City Rochester State MN Zip Code 55901  
 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 06 / 26 / 2022  
**Transaction ID : SA11AI.31599**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Schmidt, Annie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5309 Cameron Dr. NW  
 City Rochester State MN Zip Code 55901  
 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 06 / 28 / 2022  
**Transaction ID : SA11AI.31600**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 75.00  
**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 34 OF 74
<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. 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 ▼  
1750.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	10	/	2022

**Transaction ID : SA11AI.31648**

Amount of Each Receipt this Period  
100.00

Memo Item

**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 ▼  
2000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	13	/	2022

**Transaction ID : SA11AI.31649**

Amount of Each Receipt this Period  
250.00

Memo Item

**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 ▼  
2100.00

Date of Receipt  

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

**Transaction ID : SA11AI.31650**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	450.00
<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 35 OF 74
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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. 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 ▼ 2200.00

Date of Receipt 06 / 29 / 2022  
**Transaction ID : SA11AI.31651**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. Steinhauer, Jerome, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 221 S Owen Drive  
 City Madison State WI Zip Code 53705  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) Singlewire Software Occupation (for Individual) CTO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 04 / 04 / 2022  
**Transaction ID : SA11AI.31669**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

**C. Steinhauer, Jerome, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 221 S Owen Drive  
 City Madison State WI Zip Code 53705  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) Singlewire Software Occupation (for Individual) CTO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 04 / 2022  
**Transaction ID : SA11AI.31670**  
 Amount of Each Receipt this Period 200.00  
 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 36 OF 74
	<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. Steinhauer, Jerome, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 221 S Owen Drive

City Madison	State WI	Zip Code 53705
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Singlewire Software	Occupation (for Individual) CTO
--	------------------------------------

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  
 06 / 04 / 2022

**Transaction ID : SA11AI.31671**

Amount of Each Receipt this Period  
200.00

Memo Item

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

Mailing Address 44 Cherry St.

City Brattleboro	State VT	Zip Code 05301
---------------------	-------------	-------------------

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  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 14 / 2022

**Transaction ID : SA11AI.31753**

Amount of Each Receipt this Period  
25.00

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	225.00
<b>TOTAL</b> This Period (last page this line number only).....	11864.00

**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 37 OF 74
<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. Boivin, Myles C, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 105-18 Maple Avenue  
 City Vernon State CT Zip Code 06066  
 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 ▼ 680.00

Date of Receipt **06 / 27 / 2022**  
**Transaction ID : SA15.31762**  
 Amount of Each Receipt this Period 680.00  
 Memo Item

**B. Grybko, Em R, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 110 Gray St.  
 City Amherst State MA Zip Code 01002  
 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 ▼ 340.00

Date of Receipt **06 / 17 / 2022**  
**Transaction ID : SA15.31761**  
 Amount of Each Receipt this Period 340.00  
 Memo Item

**C. Jordan, Makayla D, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 963 Diane St  
 City Leeds State AL Zip Code 35094  
 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 ▼ 340.00

Date of Receipt **05 / 05 / 2022**  
**Transaction ID : SA15.31760**  
 Amount of Each Receipt this Period 340.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1360.00
<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 38 OF 74  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  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  
Jordan, Makayla D, , ,

Mailing Address 963 Diane St

City Leeds State AL Zip Code 35094

FEC ID number of contributing federal political committee.

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA15.31763**

Amount of Each Receipt this Period

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.

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.

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).....▶	<input type="text" value="340.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value="1700.00"/>

**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. ActBlue Technical Services**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 441146

City Somerville State MA Zip Code 02144

Purpose of Disbursement Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
06 / 30 / 2022

FEC Identification Number: C

Transaction ID : SB21B.30984

Amount of Each Disbursement this Period: 1714.36

Memo Item

**B. Action Network**

Full Name (Last, First, Middle Initial)

Mailing Address 1900 L Street NW

City Washington State DC Zip Code 20036

Purpose of Disbursement Software

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
04 / 07 / 2022

FEC Identification Number: C

Transaction ID : SB21B.30909

Amount of Each Disbursement this Period: 2014.53

Memo Item

**C. 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  
05 / 09 / 2022

FEC Identification Number: C

Transaction ID : SB21B.3092t

Amount of Each Disbursement this Period: 1549.30

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 5278.19

**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. 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:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 07 / 2022

FEC Identification Number

C  
Transaction ID : SB21B.30928  
Amount of Each Disbursement this Period  
2327.76

Memo Item

Full Name (Last, First, Middle Initial)

**B. Asma, Mosammet, , ,**

Mailing Address 185 Rounds Ave

City Buffalo State NY Zip Code 14215

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

MM / DD / YYYY  
04 / 13 / 2022

FEC Identification Number

C  
Transaction ID : SB21B.30951  
Amount of Each Disbursement this Period  
340.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Asma, Mosammet, , ,**

Mailing Address 185 Rounds Ave

City Buffalo State NY Zip Code 14215

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

MM / DD / YYYY  
04 / 27 / 2022

FEC Identification Number

C  
Transaction ID : SB21B.30973  
Amount of Each Disbursement this Period  
340.00

Memo Item

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

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

3007.76



**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. Bhardwaj, Siddhant, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 13 / 2022	
Mailing Address 564 Country Club Road		FEC Identification Number C [ ] <b>Transaction ID : SB21B.30955</b> Amount of Each Disbursement this Period [ ] 340.00	
City Cheshire	State CT	Zip Code 06410	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. Bhardwaj, Siddhant, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 28 / 2022	
Mailing Address 564 Country Club Road		FEC Identification Number C [ ] <b>Transaction ID : SB21B.30980</b> Amount of Each Disbursement this Period [ ] 340.00	
City Cheshire	State CT	Zip Code 06410	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. Bourne, Jada S., , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 13 / 2022	
Mailing Address 2323 Sherman Ave NW Apt. 645		FEC Identification Number C [ ] <b>Transaction ID : SB21B.30945</b> Amount of Each Disbursement this Period [ ] 340.00	
City Washington	State DC	Zip Code 20001	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).....▶	[ ] 1020.00
<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. Bourne, Jada S., , ,**

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM / DD / YYYY  
04 / 27 / 2022

Mailing Address 2323 Sherman Ave NW  
Apt. 645

City Washington State DC Zip Code 20001

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

FEC Identification Number  
**C**

Transaction ID : **SB21B.30969**

Amount of Each Disbursement this Period  
340.00

Memo Item

**B. Bresnicky, Sophie M., , ,**

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM / DD / YYYY  
04 / 13 / 2022

Mailing Address 211 Henderson Street

City Chapel Hill State NC Zip Code 27514

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

FEC Identification Number  
**C**

Transaction ID : **SB21B.30958**

Amount of Each Disbursement this Period  
255.00

Memo Item

**C. Bresnicky, Sophie M., , ,**

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM / DD / YYYY  
04 / 27 / 2022

Mailing Address 211 Henderson Street

City Chapel Hill State NC Zip Code 27514

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

FEC Identification Number  
**C**

Transaction ID : **SB21B.30976**

Amount of Each Disbursement this Period  
255.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 850.00

**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. Cheedarala, Anushka, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 13 / 2022	
Mailing Address 23330 Robin Song Dr		FEC Identification Number C [ ] <b>Transaction ID : SB21B.30938</b> Amount of Each Disbursement this Period [ ] 340.00	
City Clarksburg	State MD	Zip Code 20871	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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Crichlow, Glorianna, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 13 / 2022	
Mailing Address 14 Monson Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.30943</b> Amount of Each Disbursement this Period [ ] 340.00	
City Johnston	State RI	Zip Code 02919	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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Crichlow, Glorianna, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 27 / 2022	
Mailing Address 14 Monson Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.30967</b> Amount of Each Disbursement this Period [ ] 340.00	
City Johnston	State RI	Zip Code 02919	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) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 1020.00
<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. D'agostino, Mari A, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 13 / 2022
Mailing Address 2221 I St NW Apt. 537		FEC Identification Number C <b>Transaction ID : SB21B.30949</b> Amount of Each Disbursement this Period 340.00
City Washington	State DC	
Purpose of Disbursement Strategic Consulting	Zip Code 20037	Memo Item <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:		

Full Name (Last, First, Middle Initial) <b>B. D'agostino, Mari A, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 27 / 2022
Mailing Address 2221 I St NW Apt. 537		FEC Identification Number C <b>Transaction ID : SB21B.30971</b> Amount of Each Disbursement this Period 340.00
City Washington	State DC	
Purpose of Disbursement Strategic Consulting	Zip Code 20037	Memo Item <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:		

Full Name (Last, First, Middle Initial) <b>C. Desai, Sanjna S, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 13 / 2022
Mailing Address 3534 Willow Glen Trail		FEC Identification Number C <b>Transaction ID : SB21B.30954</b> Amount of Each Disbursement this Period 340.00
City Suwanee	State GA	
Purpose of Disbursement Strategic Consulting	Zip Code 30024	Memo Item <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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1020.00
<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. Dickson, Denae K, , ,**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	3		2	0	2	2

Mailing Address 3300 Barker Hollow Pass

City Austin State TX Zip Code 78739

FEC Identification Number

C [REDACTED]

Transaction ID : **SB21B.30942**  
Amount of Each Disbursement this Period

[REDACTED] 340.00

Memo Item

Purpose of Disbursement  
Strategic Consulting

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Dickson, Denae K, , ,**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	7		2	0	2	2

Mailing Address 3300 Barker Hollow Pass

City Austin State TX Zip Code 78739

FEC Identification Number

C [REDACTED]

Transaction ID : **SB21B.30965**  
Amount of Each Disbursement this Period

[REDACTED] 340.00

Memo Item

Purpose of Disbursement  
Strategic Consulting

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Financial Innovations**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	3		2	0	2	2

Mailing Address One Weingeroff Boulevard

City Cranston State RI Zip Code 02910

FEC Identification Number

C [REDACTED]

Transaction ID : **SB21B.30922**  
Amount of Each Disbursement this Period

[REDACTED] 37.10

Memo Item

Purpose of Disbursement  
Merchandise

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

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

[REDACTED] 717.10

**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. Google</b>		Date of Disbursement MM / DD / YYYY 04 / 25 / 2022	
Mailing Address 1600 Amphitheatre Parkway		FEC Identification Number C [ ] <b>Transaction ID : SB21B.30914</b>	
City Mountain View	State CA	Zip Code 94043	Amount of Each Disbursement this Period [ ] 2.11
Purpose of Disbursement Technology Fee		Category/ Type [ ]	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. Google</b>		Date of Disbursement MM / DD / YYYY 05 / 23 / 2022	
Mailing Address 1600 Amphitheatre Parkway		FEC Identification Number C [ ] <b>Transaction ID : SB21B.30924</b>	
City Mountain View	State CA	Zip Code 94043	Amount of Each Disbursement this Period [ ] 2.11
Purpose of Disbursement Technology Fee		Category/ Type [ ]	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. Google</b>		Date of Disbursement MM / DD / YYYY 06 / 23 / 2022	
Mailing Address 1600 Amphitheatre Parkway		FEC Identification Number C [ ] <b>Transaction ID : SB21B.30935</b>	
City Mountain View	State CA	Zip Code 94043	Amount of Each Disbursement this Period [ ] 2.11
Purpose of Disbursement Technology Fee		Category/ Type [ ]	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).....▶	[ ] 6.33
<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. Jaideep, Nandana, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 3621 182 PL SE

City Bothell State WA Zip Code 98012

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 13 / 2022

FEC Identification Number: C

Transaction ID : SB21B.30952

Amount of Each Disbursement this Period: 340.00

Memo Item

**B. Jaideep, Nandana, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 3621 182 PL SE

City Bothell State WA Zip Code 98012

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 27 / 2022

FEC Identification Number: C

Transaction ID : SB21B.30974

Amount of Each Disbursement this Period: 340.00

Memo Item

**C. Jordan, Makayla D, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 963 Diane St

City Leeds State AL Zip Code 35094

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 13 / 2022

FEC Identification Number: C

Transaction ID : SB21B.30947

Amount of Each Disbursement this Period: 340.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1020.00

**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. Jordan, Makayla D, , ,**

Mailing Address 963 Diane St

City  
Leeds

State  
AL

Zip Code  
35094

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
0	5		0	2		2	0	2	2

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.30918**  
Amount of Each Disbursement this Period  
[ ] 1020.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Khalique, Hafiza B., , ,**

Mailing Address 12350 Klinger St.

City  
Detroit

State  
MI

Zip Code  
48212

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
0	4		1	3		2	0	2	2

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.30944**  
Amount of Each Disbursement this Period  
[ ] 340.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Khalique, Hafiza B., , ,**

Mailing Address 12350 Klinger St.

City  
Detroit

State  
MI

Zip Code  
48212

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
0	4		2	8		2	0	2	2

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.30978**  
Amount of Each Disbursement this Period  
[ ] 340.00

Memo Item

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

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

1	7	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 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. KOS Media

Mailing Address 436 14th Street

City  
Oakland

State  
CA

Zip Code  
94612

Purpose of Disbursement  
Email Acquisition

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
0	4		2	8		2	0	2	2

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.30916

Amount of Each Disbursement this Period

[REDACTED]	817.25
------------	--------

Memo Item

Full Name (Last, First, Middle Initial)

### B. Mehta, Mira, , ,

Mailing Address 69 Brown Street  
Box #9908

City  
Providence

State  
RI

Zip Code  
02912

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
0	4		1	3		2	0	2	2

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.30960

Amount of Each Disbursement this Period

[REDACTED]	255.00
------------	--------

Memo Item

Full Name (Last, First, Middle Initial)

### C. Mehta, Mira, , ,

Mailing Address 69 Brown Street  
Box #9908

City  
Providence

State  
RI

Zip Code  
02912

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
0	4		2	7		2	0	2	2

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.30972

Amount of Each Disbursement this Period

[REDACTED]	255.00
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Memo Item

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

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

[REDACTED]	1327.25
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[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. Melaku, Delina, , ,**

Mailing Address 941 Enterprise Ave Inglewood  
Apt 29

City Inglewod State CA Zip Code 90302

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

/  /

FEC Identification Number

**Transaction ID : SB21B.30941**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Melaku, Delina, , ,**

Mailing Address 941 Enterprise Ave Inglewood  
Apt 29

City Inglewod State CA Zip Code 90302

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

/  /

FEC Identification Number

**Transaction ID : SB21B.30977**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. 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

/  /

FEC Identification Number

**Transaction ID : SB21B.30953**  
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 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

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	7		2	0	2	2

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.30975**  
 Amount of Each Disbursement this Period  
 [ ] 340.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Parvez, Ramisha, , ,**

Mailing Address 101 17 106th st

City  
Ozone Park

State  
NY

Zip Code  
11416

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
0	4		1	3		2	0	2	2

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.30956**  
 Amount of Each Disbursement this Period  
 [ ] 340.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Reiter, Eliana B., , ,**

Mailing Address 1340 Locust Rd NW

City  
Washington

State  
DC

Zip Code  
20012

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
0	4		2	7		2	0	2	2

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.30966**  
 Amount of Each Disbursement this Period  
 [ ] 510.00

Memo Item

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

[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
						1	1	9	0

**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. Scott, Jessica C., , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 446 Serpentine Drive

City Pittsburgh State PA Zip Code 15243

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 13 / 2022

FEC Identification Number: C

Transaction ID : SB21B.30946

Amount of Each Disbursement this Period: 340.00

Memo Item

**B. Scott, Jessica C., , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 446 Serpentine Drive

City Pittsburgh State PA Zip Code 15243

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 27 / 2022

FEC Identification Number: C

Transaction ID : SB21B.30970

Amount of Each Disbursement this Period: 340.00

Memo Item

**C. Small, Heidi S., , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 115 Rosemary Lane

City Wallingford State CT Zip Code 06492

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 13 / 2022

FEC Identification Number: C

Transaction ID : SB21B.30962

Amount of Each Disbursement this Period: 255.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 935.00

**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. Small, Heidi S., , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 115 Rosemary Lane

City Wallingford State CT Zip Code 06492

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 27 / 2022

FEC Identification Number: C

Transaction ID : SB21B.30968

Amount of Each Disbursement this Period: 255.00

Memo Item

**B. Summit Campaign Strategies Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 87 Summit Circle

City Shelburne State VT Zip Code 05482

Purpose of Disbursement Email Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 19 / 2022

FEC Identification Number: C

Transaction ID : SB21B.30912

Amount of Each Disbursement this Period: 6000.00

Memo Item

**C. Summit Campaign Strategies Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 87 Summit Circle

City Shelburne State VT Zip Code 05482

Purpose of Disbursement Email Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 24 / 2022

FEC Identification Number: C

Transaction ID : SB21B.30925

Amount of Each Disbursement this Period: 6000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 12255.00

**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. Summit Campaign Strategies Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 87 Summit Circle

City Shelburne State VT Zip Code 05482

Purpose of Disbursement Email Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 28 / 2022

FEC Identification Number: C

Transaction ID : SB21B.30934

Amount of Each Disbursement this Period: 6000.00

Memo Item

**B. Viscomi Solet, Celia G., , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 52 Page Road

City Newton State MA Zip Code 02460

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 13 / 2022

FEC Identification Number: C

Transaction ID : SB21B.30939

Amount of Each Disbursement this Period: 340.00

Memo Item

**C. Walker, Darrian, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 5148 Northwind Blvd D4

City Valdosta State GA Zip Code 31605

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 13 / 2022

FEC Identification Number: C

Transaction ID : SB21B.3094t

Amount of Each Disbursement this Period: 340.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 6680.00

**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. Walker, Darrian, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 5148 Northwind Blvd  
D4

City Valdosta State GA Zip Code 31605

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 04 / 27 / 2022

FEC Identification Number: C

Transaction ID : SB21B.30964

Amount of Each Disbursement this Period: 340.00

Memo Item

**B. Williams, Alexandria, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 713 North Hickory

City North Little Rock State AR Zip Code 72114

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 04 / 13 / 2022

FEC Identification Number: C

Transaction ID : SB21B.30937

Amount of Each Disbursement this Period: 340.00

Memo Item

**C. Williams, Alexandria, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 713 North Hickory

City North Little Rock State AR Zip Code 72114

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 04 / 27 / 2022

FEC Identification Number: C

Transaction ID : SB21B.30963

Amount of Each Disbursement this Period: 340.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1020.00

**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. Young, Marquita L., , ,**

Mailing Address 2709 Snyder Avenue

City Philadelphia

State PA

Zip Code 19145

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

MM / DD / YYYY  
04 / 13 / 2022

FEC Identification Number

C  
**Transaction ID : SB21B.30950**  
Amount of Each Disbursement this Period  
340.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Young, Marquita L., , ,**

Mailing Address 2709 Snyder Avenue

City Philadelphia

State PA

Zip Code 19145

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

MM / DD / YYYY  
04 / 28 / 2022

FEC Identification Number

C  
**Transaction ID : SB21B.30979**  
Amount of Each Disbursement this Period  
340.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Zhu, Bowen, , ,**

Mailing Address 3621 Cum Laude Ct  
102/2

City Raleigh

State NC

Zip Code 27606

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

MM / DD / YYYY  
04 / 13 / 2022

FEC Identification Number

C  
**Transaction ID : SB21B.30981**  
Amount of Each Disbursement this Period  
255.00

Memo Item

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

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

935.00



**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. Zhu, Bowen, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 27 / 2022	
Mailing Address 3621 Cum Laude Ct 102/2		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.30983</b>	
City Raleigh	State NC	Zip Code 27606	Amount of Each Disbursement this Period [REDACTED] 255.00
Purpose of Disbursement Strategic Consulting		Category/Type [REDACTED]	<input type="checkbox"/> Memo Item
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. Zoom Inc.</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2022	
Mailing Address 55 Almaden Boulevard 6th Floor		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.30904</b>	
City San Jose	State CA	Zip Code 95113	Amount of Each Disbursement this Period [REDACTED] 53.00
Purpose of Disbursement Software		Category/Type [REDACTED]	<input type="checkbox"/> Memo Item
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. Zoom Inc.</b>		Date of Disbursement MM / DD / YYYY 05 / 02 / 2022	
Mailing Address 55 Almaden Boulevard 6th Floor		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.30917</b>	
City San Jose	State CA	Zip Code 95113	Amount of Each Disbursement this Period [REDACTED] 53.00
Purpose of Disbursement Software		Category/Type [REDACTED]	<input type="checkbox"/> Memo Item
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).....▶	[REDACTED] 361.00
<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**

**A. Zoom Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 55 Almaden Boulevard  
6th Floor

City San Jose State CA Zip Code 95113

Purpose of Disbursement Software

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement: MM / DD / YYYY  
06 / 01 / 2022

FEC Identification Number: C

Transaction ID : SB21B.30927

Amount of Each Disbursement this Period: 369.92

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	369.92
<b>TOTAL</b> This Period (last page this line number only).....▶	41732.55

# 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. Agbanyo, Jennifer, , ,**

Mailing Address 1530 Archer Road Apt 2G

City  
Bronx

State  
NY

Zip Code  
10462

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
0	4		2	6		2	0	2	2

FEC Identification Number

C [REDACTED]

Transaction ID : SB29.30858

Amount of Each Disbursement this Period

[REDACTED] 625.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Bembury, Maya, , ,**

Mailing Address 128-50 Francis Lewis Blvd

City  
Laurelton

State  
NY

Zip Code  
11413

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
0	4		2	7		2	0	2	2

FEC Identification Number

C [REDACTED]

Transaction ID : SB29.30860

Amount of Each Disbursement this Period

[REDACTED] 625.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Brown, Jason, , ,**

Mailing Address 5110 Cool Hill Rd

City  
Providence Forge

State  
VA

Zip Code  
23140

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
0	4		0	6		2	0	2	2

FEC Identification Number

C [REDACTED]

Transaction ID : SB29.30844

Amount of Each Disbursement this Period

[REDACTED] 250.00

Memo Item

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

[REDACTED] 1500.00

**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) <b>A. Brown, Jason, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 19 / 2022	
Mailing Address 5110 Cool Hill Rd		FEC Identification Number C [ ] <b>Transaction ID : SB29.30855</b> Amount of Each Disbursement this Period [ ] 250.00	
City Providence Forge	State VA	Zip Code 23140	Category/ Type [ ]
Purpose of Disbursement Strategic Consulting - IE Only Account			
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. Brown, Jason, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 27 / 2022	
Mailing Address 5110 Cool Hill Rd		FEC Identification Number C [ ] <b>Transaction ID : SB29.30864</b> Amount of Each Disbursement this Period [ ] 250.00	
City Providence Forge	State VA	Zip Code 23140	Category/ Type [ ]
Purpose of Disbursement Strategic Consulting - IE Only Account			
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. Brown, Jason, , ,</b>		Date of Disbursement MM / DD / YYYY 05 / 24 / 2022	
Mailing Address 5110 Cool Hill Rd		FEC Identification Number C [ ] <b>Transaction ID : SB29.30884</b> Amount of Each Disbursement this Period [ ] 250.00	
City Providence Forge	State VA	Zip Code 23140	Category/ Type [ ]
Purpose of Disbursement Strategic Consulting - IE Only Account			
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).....▶	[ ] 750.00
<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 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**

**A. Brown, Jason, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 5110 Cool Hill Rd

City Providence Forge State VA Zip Code 23140

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: 06 / 08 / 2022

FEC Identification Number: C  
 Transaction ID : SB29.30895  
 Amount of Each Disbursement this Period: 250.00

Memo Item

**B. Brown, Jason, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 5110 Cool Hill Rd

City Providence Forge State VA Zip Code 23140

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: 06 / 22 / 2022

FEC Identification Number: C  
 Transaction ID : SB29.30901  
 Amount of Each Disbursement this Period: 250.00

Memo Item

**C. Community Dynamix**

Full Name (Last, First, Middle Initial)

Mailing Address 15606 NE 40th St,

City Redmond State WA Zip Code 98052

Purpose of Disbursement Team Retreat - IE Only Account

Candidate Name

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

State: District:

Date of Disbursement: 05 / 16 / 2022

FEC Identification Number: C  
 Transaction ID : SB29.30877  
 Amount of Each Disbursement this Period: 900.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1400.00

**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 X 29 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. Generation Ratify
Full Name (Last, First, Middle Initial)
Mailing Address 201 Nashville Avenue
City New Orleans State LA Zip Code 70115
Purpose of Disbursement Donation - IE Ony Account
Candidate Name
Office Sought: House Senate President
Disbursement For: Primary General Other (specify)
State: District:
Date of Disbursement 04 / 05 / 2022
FEC Identification Number C
Transaction ID : SB29.30841
Amount of Each Disbursement this Period 1000.00
Memo Item

B. Google
Full Name (Last, First, Middle Initial)
Mailing Address 1600 Amphitheatre Parkway
City Mountain View State CA Zip Code 94043
Purpose of Disbursement Technology Fee - IE Ony Account
Candidate Name
Office Sought: House Senate President
Disbursement For: Primary General Other (specify)
State: District:
Date of Disbursement 04 / 06 / 2022
FEC Identification Number C
Transaction ID : SB29.30843
Amount of Each Disbursement this Period 78.36
Memo Item

C. Google
Full Name (Last, First, Middle Initial)
Mailing Address 1600 Amphitheatre Parkway
City Mountain View State CA Zip Code 94043
Purpose of Disbursement Technology Fee - IE Ony Account
Candidate Name
Office Sought: House Senate President
Disbursement For: Primary General Other (specify)
State: District:
Date of Disbursement 05 / 09 / 2022
FEC Identification Number C
Transaction ID : SB29.30874
Amount of Each Disbursement this Period 82.68
Memo Item

SUBTOTAL of Disbursements This Page (optional) 1161.04
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 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**

**A. Google**

Full Name (Last, First, Middle Initial)

Mailing Address 1600 Amphitheatre Parkway

City Mountain View State CA Zip Code 94043

Purpose of Disbursement Technology Fee - IE Only Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 06 / 06 / 2022

FEC Identification Number: C

Transaction ID : SB29.30894

Amount of Each Disbursement this Period: 52.93

Memo Item

**B. Guthman, Nick, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 10913 Lindblade St.

City Culver City State CA Zip Code 90230

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: 04 / 01 / 2022

FEC Identification Number: C

Transaction ID : SB29.30838

Amount of Each Disbursement this Period: 379.61

Memo Item

**C. Guthman, Nick, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 10913 Lindblade St.

City Culver City State CA Zip Code 90230

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: 04 / 01 / 2022

FEC Identification Number: C

Transaction ID : SB29.30840

Amount of Each Disbursement this Period: 6125.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 6557.54

**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) <b>A. Guthman, Nick, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 27 / 2022	
Mailing Address 10913 Lindblade St.		FEC Identification Number C [ ] <b>Transaction ID : SB29.30866</b> Amount of Each Disbursement this Period [ ] 379.61	
City Culver City	State CA	Zip Code 90230	Category/ Type [ ]
Purpose of Disbursement Strategic Consulting - IE Only Account		Candidate Name	
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. Guthman, Nick, , ,</b>		Date of Disbursement MM / DD / YYYY 05 / 25 / 2022	
Mailing Address 10913 Lindblade St.		FEC Identification Number C [ ] <b>Transaction ID : SB29.30886</b> Amount of Each Disbursement this Period [ ] 5225.00	
City Culver City	State CA	Zip Code 90230	Category/ Type [ ]
Purpose of Disbursement Strategic Consulting - IE Only Account		Candidate Name	
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. Guthman, Nick, , ,</b>		Date of Disbursement MM / DD / YYYY 06 / 02 / 2022	
Mailing Address 10913 Lindblade St.		FEC Identification Number C [ ] <b>Transaction ID : SB29.30889</b> Amount of Each Disbursement this Period [ ] 352.41	
City Culver City	State CA	Zip Code 90230	Category/ Type [ ]
Purpose of Disbursement Strategic Consulting - IE Only Account		Candidate Name	
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).....▶	[ ] 5957.02
<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 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**

**A. Guthman, Nick, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 10913 Lindblade St.

City Culver City State CA Zip Code 90230

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: MM / DD / YYYY  
06 / 03 / 2022

FEC Identification Number: C

Transaction ID : SB29.30891

Amount of Each Disbursement this Period: 27.20

Memo Item

**B. Guthman, Nick, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 10913 Lindblade St.

City Culver City State CA Zip Code 90230

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: MM / DD / YYYY  
06 / 14 / 2022

FEC Identification Number: C

Transaction ID : SB29.30900

Amount of Each Disbursement this Period: 3062.50

Memo Item

**C. Guthman, Nick, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 10913 Lindblade St.

City Culver City State CA Zip Code 90230

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: MM / DD / YYYY  
06 / 29 / 2022

FEC Identification Number: C

Transaction ID : SB29.30903

Amount of Each Disbursement this Period: 3062.50

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 6152.20

**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)

<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**

**A. Hussain, Alisha, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 149 Forbell Street

City Brooklyn State NY Zip Code 11208

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: 05 / 02 / 2022

FEC Identification Number: C

Transaction ID : SB29.30868

Amount of Each Disbursement this Period: 625.00

Memo Item

**B. Iqbal, Ayla, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 1284 Dutch Broadway

City Valley Stream State NY Zip Code 11580

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: 05 / 04 / 2022

FEC Identification Number: C

Transaction ID : SB29.30871

Amount of Each Disbursement this Period: 625.00

Memo Item

**C. Kleine, Aleksia, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 290 Boston Avenue

City Medford State MA Zip Code 02155

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: 04 / 27 / 2022

FEC Identification Number: C

Transaction ID : SB29.30863

Amount of Each Disbursement this Period: 60.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1310.00

**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) <b>A. Kleine, Aleksia, , ,</b>		Date of Disbursement MM / DD / YYYY 05 / 17 / 2022	
Mailing Address 290 Boston Avenue		FEC Identification Number C [ ] <b>Transaction ID : SB29.30878</b> Amount of Each Disbursement this Period [ ] 120.00	
City Medford	State MA	Zip Code 02155	Category/ Type [ ]
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:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. Kleine, Aleksia, , ,</b>		Date of Disbursement MM / DD / YYYY 06 / 13 / 2022	
Mailing Address 290 Boston Avenue		FEC Identification Number C [ ] <b>Transaction ID : SB29.30897</b> Amount of Each Disbursement this Period [ ] 120.00	
City Medford	State MA	Zip Code 02155	Category/ Type [ ]
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:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. March On</b>		Date of Disbursement MM / DD / YYYY 04 / 13 / 2022	
Mailing Address 267 Kentlands Boulevard		FEC Identification Number C [ ] <b>Transaction ID : SB29.30853</b> Amount of Each Disbursement this Period [ ] 2800.00	
City Gaithersburg	State MD	Zip Code 20878	Category/ Type [ ]
Purpose of Disbursement Donation - 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:	<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 3040.00
<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 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**

**A. Menon, Varsha, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 5617 Yeary Rd

City Plano State TX Zip Code 75093

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: 04 / 06 / 2022

FEC Identification Number: C

Transaction ID : SB29.30845

Amount of Each Disbursement this Period: 250.00

Memo Item

**B. Menon, Varsha, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 5617 Yeary Rd

City Plano State TX Zip Code 75093

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: 04 / 19 / 2022

FEC Identification Number: C

Transaction ID : SB29.30856

Amount of Each Disbursement this Period: 250.00

Memo Item

**C. Menon, Varsha, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 5617 Yeary Rd

City Plano State TX Zip Code 75093

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: 04 / 27 / 2022

FEC Identification Number: C

Transaction ID : SB29.30865

Amount of Each Disbursement this Period: 250.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 750.00

**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. Menon, Varsha, , ,**

Date of Disbursement  
MM / DD / YYYY  
05 / 24 / 2022

Mailing Address 5617 Yeary Rd

City Plano State TX Zip Code 75093

Purpose of Disbursement  
Strategic Consulting - IE Only Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

FEC Identification Number  
C  
Transaction ID : **SB29.30885**  
Amount of Each Disbursement this Period  
250.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Menon, Varsha, , ,**

Date of Disbursement  
MM / DD / YYYY  
06 / 08 / 2022

Mailing Address 5617 Yeary Rd

City Plano State TX Zip Code 75093

Purpose of Disbursement  
Strategic Consulting - IE Only Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

FEC Identification Number  
C  
Transaction ID : **SB29.30896**  
Amount of Each Disbursement this Period  
250.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Menon, Varsha, , ,**

Date of Disbursement  
MM / DD / YYYY  
06 / 22 / 2022

Mailing Address 5617 Yeary Rd

City Plano State TX Zip Code 75093

Purpose of Disbursement  
Strategic Consulting - IE Only Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

FEC Identification Number  
C  
Transaction ID : **SB29.30902**  
Amount of Each Disbursement this Period  
250.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 750.00

**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. Mikayla Withers Consulting LLC

Mailing Address 1308 S De Soto Ave

City  
Tampa

State  
FL

Zip Code  
33606

Purpose of Disbursement  
Fundraising 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
0	5		0	5		2	0	2	2

FEC Identification Number

C [REDACTED]

Transaction ID : SB29.30873

Amount of Each Disbursement this Period

[REDACTED] 2700.00

Memo Item

Full Name (Last, First, Middle Initial)

### B. Mikayla Withers Consulting LLC

Mailing Address 1308 S De Soto Ave

City  
Tampa

State  
FL

Zip Code  
33606

Purpose of Disbursement  
Fundraising 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
0	5		3	1		2	0	2	2

FEC Identification Number

C [REDACTED]

Transaction ID : SB29.30888

Amount of Each Disbursement this Period

[REDACTED] 2700.00

Memo Item

Full Name (Last, First, Middle Initial)

### C. Sandler, Reiff, Lamb, Rosenstein & Birkenstock, PC

Mailing Address 1090 Vermont Ave. NW  
Suite 750

City  
Washington

State  
DC

Zip Code  
20005

Purpose of Disbursement  
Legal Services - 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
0	6		1	3		2	0	2	2

FEC Identification Number

C [REDACTED]

Transaction ID : SB29.30898

Amount of Each Disbursement this Period

[REDACTED] 1050.00

Memo Item

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

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

[REDACTED] 6450.00

[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 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) <b>A. Stahr, Morgan, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 07 / 2022	
Mailing Address 515 S Poplar St		FEC Identification Number C [ ] <b>Transaction ID : SB29.30847</b> Amount of Each Disbursement this Period [ ] 546.96	
City Hazleton	State PA	Zip Code 18201	Category/ Type [ ]
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:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. Stahr, Morgan, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 07 / 2022	
Mailing Address 515 S Poplar St		FEC Identification Number C [ ] <b>Transaction ID : SB29.30848</b> Amount of Each Disbursement this Period [ ] 6125.00	
City Hazleton	State PA	Zip Code 18201	Category/ Type [ ]
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:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. Stahr, Morgan, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 11 / 2022	
Mailing Address 515 S Poplar St		FEC Identification Number C [ ] <b>Transaction ID : SB29.30851</b> Amount of Each Disbursement this Period [ ] 6125.00	
City Hazleton	State PA	Zip Code 18201	Category/ Type [ ]
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:	<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 12796.96
<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 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**

**A. Stahr, Morgan, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 515 S Poplar St

City Hazleton State PA Zip Code 18201

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: 04 / 27 / 2022

FEC Identification Number: C

Transaction ID : SB29.30867

Amount of Each Disbursement this Period: 6125.00

Memo Item

**B. Stahr, Morgan, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 515 S Poplar St

City Hazleton State PA Zip Code 18201

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: 05 / 18 / 2022

FEC Identification Number: C

Transaction ID : SB29.30883

Amount of Each Disbursement this Period: 546.96

Memo Item

**C. Stahr, Morgan, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 515 S Poplar St

City Hazleton State PA Zip Code 18201

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: 06 / 03 / 2022

FEC Identification Number: C

Transaction ID : SB29.30892

Amount of Each Disbursement this Period: 546.96

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 7218.92

**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**

**A. Stahr, Morgan, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 515 S Poplar St

City Hazleton State PA Zip Code 18201

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: 06 / 03 / 2022

FEC Identification Number: C  
Transaction ID : SB29.30893  
Amount of Each Disbursement this Period: 6125.00

Memo Item

**B. Torres, Mayana N, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 127 Maple Street

City Brooklyn State NY Zip Code 11225

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: 04 / 12 / 2022

FEC Identification Number: C  
Transaction ID : SB29.30852  
Amount of Each Disbursement this Period: 374.00

Memo Item

**C. Unfiltered Media LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 2663 Manhattan Place #102

City Vienna State VA Zip Code 22180

Purpose of Disbursement  
Digital Consulting - IE Only Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 04 / 01 / 2022

FEC Identification Number: C  
Transaction ID : SB29.30839  
Amount of Each Disbursement this Period: 1200.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 7699.00

**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. Unfiltered Media LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		03		2022

Mailing Address 2663 Manhattan Place  
#102

City Vienna State VA Zip Code 22180

Purpose of Disbursement  
Digital Consulting - IE Only Account

FEC Identification Number

Transaction ID : SB29.30870

Amount of Each Disbursement this Period

 1200.00

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Memo Item

Full Name (Last, First, Middle Initial)

**B. Unfiltered Media LLC**

Date of Disbursement

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

Mailing Address 2663 Manhattan Place  
#102

City Vienna State VA Zip Code 22180

Purpose of Disbursement  
Digital Consulting - IE Only Account

FEC Identification Number

Transaction ID : SB29.30890

Amount of Each Disbursement this Period

 1200.00

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

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

Mailing Address

City State Zip Code

Purpose of Disbursement

FEC Identification Number

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Memo Item

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

 2400.00

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

 65892.68