

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**
PROGRESSIVE CHOICES PAC

ADDRESS (number and street) **P.O. BOX 58**
 Check if different than previously reported. (ACC) **EVANSTON IL 60204**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00381806 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 / / 2020 through / / 2020

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

Signature of Treasurer Lennon, Karen, , , [Electronically Filed] Date / / 2020

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)

Page 2

Write or Type Committee Name

PROGRESSIVE CHOICES PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>		66029.91
(b) Cash on Hand at Beginning of Reporting Period.....	102140.28	
(c) Total Receipts (from Line 19)	15000.00	63500.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	117140.28	129529.91
7. Total Disbursements (from Line 31).....	22319.81	34709.44
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	94820.47	94820.47
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	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

PROGRESSIVE CHOICES PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	5000.00	48500.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	5000.00	48500.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	10000.00	15000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	15000.00	63500.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	15000.00	63500.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	15000.00	63500.00

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	319.81	1709.44
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	319.81	1709.44
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	22000.00	33000.00
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).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	22319.81	34709.44
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	22319.81	34709.44

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	15000.00	63500.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	15000.00	63500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	319.81	1709.44
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	319.81	1709.44

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

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

FOR LINE NUMBER: PAGE 6 OF 16
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Stone-Belic, Ellen, , ,

Mailing Address 418 W. Webster

City Chicago State IL Zip Code 60614

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2020

Transaction ID : SA11AI.4439

Amount of Each Receipt this Period
5000.00

Memo Item

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

Mailing Address

City State Zip Code

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 16
<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)
PROGRESSIVE CHOICES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. American Optometric Association PAC

Mailing Address 1505 Prince Street, #300

City Alexendria	State VA	Zip Code 22314
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00024968

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		19		2020

Transaction ID : SA11C.4438

Amount of Each Receipt this Period
5000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Communication Workers of America COPE PCC

Mailing Address 501 3rd St., NW, Suite 1060

City Washington	State DC	Zip Code 20001
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FEC ID number of contributing federal political committee. **C** C00002089

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		11		2020

Transaction ID : SA11C.4437

Amount of Each Receipt this Period
5000.00

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	10000.00
TOTAL This Period (last page this line number only).....	10000.00

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

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

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)
PROGRESSIVE CHOICES PAC

A. Broadway 5533 LLC

Full Name (Last, First, Middle Initial)

Mailing Address 1025 W Sunnyside Avenue

City Chicago State IL Zip Code 60640

Purpose of Disbursement Office Rent

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 13 / 2020

FEC Identification Number: C

Transaction ID : SB21B.4470

Amount of Each Disbursement this Period: 300.00

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

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

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

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	300.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

Full Name (Last, First, Middle Initial) A. ALYSE FOR ALASKA		Date of Disbursement MM / DD / YYYY 06 / 04 / 2020
Mailing Address P.O. BOX 90020		FEC Identification Number C C00665711 Transaction ID : SB23.4455 Amount of Each Disbursement this Period 1000.00
City ANCHORAGE	State AK	
Purpose of Disbursement Contribution	Zip Code 99509	Memo Item <input type="checkbox"/>
Candidate Name GALVIN, ALYSE, , ,	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: AK	District: 00	

Full Name (Last, First, Middle Initial) B. BETSY DIRKSEN LONDRIGAN FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 16 / 2020
Mailing Address PO BOX 275		FEC Identification Number C C00649483 Transaction ID : SB23.4473 Amount of Each Disbursement this Period 1000.00
City SPRINGFIELD	State IL	
Purpose of Disbursement Contribution	Zip Code 62705	Memo Item <input type="checkbox"/>
Candidate Name LONDRIGAN, BETSY DIRKSEN, , ,	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL	District: 13	

Full Name (Last, First, Middle Initial) C. CINDY AXNE FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 24 / 2020
Mailing Address P.O. BOX 65551		FEC Identification Number C C00646844 Transaction ID : SB23.4476 Amount of Each Disbursement this Period 1000.00
City WEST DES MOINES	State IA	
Purpose of Disbursement Contribution	Zip Code 50265	Memo Item <input type="checkbox"/>
Candidate Name AXNE, CINDY, , ,	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IA	District: 03	

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

3000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

Full Name (Last, First, Middle Initial)
A. DR. CAMERON WEBB FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		30		2020

Mailing Address PO BOX 679

FEC Identification Number

C C00714964

Transaction ID : SB23.4484

Amount of Each Disbursement this Period

1000.00

Memo Item

City CHARLOTTEVILLE State VA Zip Code 22902

Purpose of Disbursement
Contribution

Candidate Name

WEBB, BRYANT CAMERON, , ,

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: VA District: 05

Full Name (Last, First, Middle Initial)
B. EASTMAN FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		04		2020

Mailing Address 16411 MARCY STREET

FEC Identification Number

C C00639310

Transaction ID : SB23.4443

Amount of Each Disbursement this Period

1000.00

Memo Item

City OMAHA State NE Zip Code 68118

Purpose of Disbursement
Contribution

Candidate Name

EASTMAN, KARA, , ,

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: NE District: 02

Full Name (Last, First, Middle Initial)
C. FRIENDS OF BEN MCADAMS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		04		2020

Mailing Address P O BOX 522167

FEC Identification Number

C C00658633

Transaction ID : SB23.4468

Amount of Each Disbursement this Period

1000.00

Memo Item

City SALT LAKE CITY State UT Zip Code 84152

Purpose of Disbursement
Contribution

Candidate Name

MCADAMS, BEN, , ,

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: UT District: 04

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

3000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

A. FRIENDS OF DANA BALTER

Full Name (Last, First, Middle Initial)
Mailing Address 2200 S. SALINA ST.
#701

City SYRACUSE State NY Zip Code 13205

Purpose of Disbursement Contribution

Candidate Name
BALTER, DANA, , ,

Office Sought: House Senate President
State: NY District: 24

Disbursement For: 2020
 Primary General Other (specify) ▼

Date of Disbursement: 06 / 30 / 2020

FEC Identification Number: **C00655183**
Transaction ID : **SB23.4487**
Amount of Each Disbursement this Period: 1000.00

Memo Item

B. GOROFF FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 215

City EAST SETAUKET State NY Zip Code 11733

Purpose of Disbursement Contribution

Candidate Name
GOROFF, NANCY, , ,

Office Sought: House Senate President
State: NY District: 01

Disbursement For: 2020
 Primary General Other (specify)

Date of Disbursement: 06 / 13 / 2020

FEC Identification Number: **C00711564**
Transaction ID : **SB23.4472**
Amount of Each Disbursement this Period: 1000.00

Memo Item

C. HALEY STEVENS FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address 33717 WOODWARD AVE
#539

City BIRMINGHAM State MI Zip Code 48009

Purpose of Disbursement Contribution
HALEY STEVENS

Candidate Name
STEVENS, HALEY, , ,

Office Sought: House Senate President
State: MI District: 11

Disbursement For: 2020
 Primary General Other (specify) ▼

Date of Disbursement: 06 / 29 / 2020

FEC Identification Number: **C00638650**
Transaction ID : **SB23.4477**
Amount of Each Disbursement this Period: 1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

Full Name (Last, First, Middle Initial)

A. JOYCE ELLIOTT FOR CONGRESS

Mailing Address PO BOX 179

City LITTLE ROCK State AR Zip Code 72203

Purpose of Disbursement Contribution

Candidate Name
ELLIOTT, JOYCE ANN, , ,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: AR District: 02

Date of Disbursement

MM / DD / YYYY
06 / 04 / 2020

FEC Identification Number

C C00726943

Transaction ID : SB23.4449

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. KATE FOR CONGRESS

Mailing Address P.O. BOX 413

City CINCINNATI State OH Zip Code 45201

Purpose of Disbursement Contribution

Candidate Name
SCHRODER, KATE, , ,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: OH District: 01

Date of Disbursement

MM / DD / YYYY
06 / 04 / 2020

FEC Identification Number

C C00711630

Transaction ID : SB23.4440

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. KATHLEEN WILLIAMS FOR MONTANA

Mailing Address PO BOX 548

City BOZEMAN State MT Zip Code 59771

Purpose of Disbursement Contribution

Candidate Name
WILLIAMS, KATHLEEN, , ,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: MT District: 01

Date of Disbursement

MM / DD / YYYY
06 / 04 / 2020

FEC Identification Number

C C00701748

Transaction ID : SB23.4452

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

3000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

Full Name (Last, First, Middle Initial)
A. LAUREN UNDERWOOD FOR CONGRESS

Date of Disbursement
MM / DD / YYYY
06 / 24 / 2020

Mailing Address 2758 US HIGHWAY 34
SUITE B#149

City OSWEGO State IL Zip Code 60543

Purpose of Disbursement Contribution

Candidate Name
UNDERWOOD, LAUREN, , ,

Office Sought: House Senate President Disbursement For: 2020
 Primary General Other (specify) ▼

State: IL District: 14

FEC Identification Number
C C00652719
Transaction ID : SB23.4475
Amount of Each Disbursement this Period
1000.00

Memo Item

Full Name (Last, First, Middle Initial)
B. MICHELLE FOR KANSAS

Date of Disbursement
MM / DD / YYYY
06 / 30 / 2020

Mailing Address PO BOX 67101

City TOPEKA State KS Zip Code 66667

Purpose of Disbursement Contribution

Candidate Name
DE LA ISLA, MICHELLE, , ,

Office Sought: House Senate President Disbursement For: 2020
 Primary General Other (specify) ▼

State: KS District: 02

FEC Identification Number
C C00732792
Transaction ID : SB23.4481
Amount of Each Disbursement this Period
1000.00

Memo Item

Full Name (Last, First, Middle Initial)
C. PATRICIA TIMMONS-GOODSON FOR CONGRESS

Date of Disbursement
MM / DD / YYYY
06 / 04 / 2020

Mailing Address PO BOX 87856

City FAYETTEVILLE State NC Zip Code 28304

Purpose of Disbursement Contribution

Candidate Name
TIMMONS-GOODSON, PATRICIA, , ,

Office Sought: House Senate President Disbursement For: 2020
 Primary General Other (specify) ▼

State: NC District: 08

FEC Identification Number
C C00732800
Transaction ID : SB23.4446
Amount of Each Disbursement this Period
1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

A. SCHOLTEN FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 6233

City
GRAND RAPIDS

State
MI

Zip Code
49510

Purpose of Disbursement
Contribution

Candidate Name

SCHOLTEN, HILLARY, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: MI District: 03

Date of Disbursement

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

FEC Identification Number

C C00711317

Transaction ID : SB23.4490

Amount of Each Disbursement this Period

1	0	0	0	0	0
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Memo Item

B. SRI FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 898

City
SUGAR LAND

State
TX

Zip Code
77487

Purpose of Disbursement
Contribution

Candidate Name

KULKARNI, SRI PRESTON, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify)

State: TX District: 22

Date of Disbursement

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

FEC Identification Number

C C00662874

Transaction ID : SB23.4474

Amount of Each Disbursement this Period

1	0	0	0	0	0
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Memo Item

C. SUSAN WILD FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address 1636 N CEDAR CREST BLVD
#183

City
ALLENTOWN

State
PA

Zip Code
18104

Purpose of Disbursement
Contribution

Candidate Name

WILD, SUSAN, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: PA District: 07

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	4		2	0	2	0

FEC Identification Number

C C00658567

Transaction ID : SB23.4461

Amount of Each Disbursement this Period

1	0	0	0	0	0
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Memo Item

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

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

3	0	0	0	0	0
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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

A. SUSIE LEE FOR CONGRESS

Full Name (Last, First, Middle Initial)
Date of Disbursement: 06 / 04 / 2020

Mailing Address 5130 S FORT APACHE RD
STE. 215-382

City LAS VEGAS State NV Zip Code 89148

Purpose of Disbursement Contribution
FEC Identification Number: C00655613
Transaction ID : SB23.4465
Amount of Each Disbursement this Period: 1000.00

Candidate Name
LEE, SUSIE, , ,
Category/Type

Office Sought: House Senate President
Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: NV District: 03
 Memo Item

B. THE MARKEY COMMITTEE

Full Name (Last, First, Middle Initial)
Date of Disbursement: 06 / 29 / 2020

Mailing Address PO BOX 120029

City BOSTON State MA Zip Code 02112

Purpose of Disbursement Contribution
FEC Identification Number: C00196774
Transaction ID : SB23.4480
Amount of Each Disbursement this Period: 1000.00

Candidate Name
MARKEY, EDWARD J., , ,
Category/Type

Office Sought: House Senate President
Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: MA District: 00
 Memo Item

C. TOM O'HALLERAN FOR CONGRESS

Full Name (Last, First, Middle Initial)
Date of Disbursement: 06 / 04 / 2020

Mailing Address PO BOX 63992

City PHOENIX State AZ Zip Code 85082

Purpose of Disbursement Contribution
FEC Identification Number: C00582890
Transaction ID : SB23.4464
Amount of Each Disbursement this Period: 1000.00

Candidate Name
O'HALLERAN, TOM, , ,
Category/Type

Office Sought: House Senate President
Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: AZ District: 01
 Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

Full Name (Last, First, Middle Initial)
A. XOCHITL FOR NEW MEXICO

Mailing Address PO BOX 2250

City LAS CRUCES State NM Zip Code 88004

Purpose of Disbursement
Contribution

Candidate Name
TORRES SMALL, XOCHITL, , ,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: NM District: 02

Date of Disbursement

M M / D D / Y Y Y Y
06 / 04 / 2020

FEC Identification Number

C C00666149

Transaction ID : SB23.4458
Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)
B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)
C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

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

1000.00

22000.00