

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 WASHINGTON DC 20005 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00670216 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X] 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) Mar 20 (M3) Apr 20 (M4) May 20 (M5) Jun 20 (M6) Jul 20 (M7) Aug 20 (M8) Sep 20 (M9) Oct 20 (M10) Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE) (c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S) Election on M M / D D / Y Y Y Y Y Y in the State of (d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on 11 / 03 / 2020 in the State of

5. Covering Period 10 / 01 / 2020 through 11 / 23 / 2020

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 11 / 30 / 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)

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="2020"/>	<input type="text" value="38109.63"/>	<input type="text" value="38109.63"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="116099.52"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="129455.95"/>	<input type="text" value="569289.41"/>
(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="245555.47"/>	<input type="text" value="607399.04"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="101941.63"/>	<input type="text" value="463785.20"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="143613.84"/>	<input type="text" value="143613.84"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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

Write or Type Committee Name

YOUTH PROGRESSIVE ACTION CATALYST

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	42850.17	129930.42
(ii) Unitemized	82165.78	385661.99
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	125015.95	515592.41
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	2000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	125015.95	517592.41
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).....	2600.00	4320.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	1840.00	47377.00
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)).....▶	129455.95	569289.41
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	129455.95	569289.41

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	86737.13	411693.80
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	86737.13	411693.80
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	500.00	6467.50
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	1136.00
(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	1136.00
29. Other Disbursements (Including Non-Federal Donations).....	14704.50	44487.90
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)) ..	101941.63	463785.20
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	101941.63	463785.20

DETAILED SUMMARY PAGE
of Disbursements

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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)	125015.95	517592.41
34. Total Contribution Refunds (from Line 28(d))	0.00	1136.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	125015.95	516456.41
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	86737.13	411693.80
37. Offsets to Operating Expenditures (from Line 15, page 3).....	2600.00	4320.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	84137.13	407373.80

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 217
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Abt, Margaret, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 13 / 2020
Mailing Address 1322 Westway Drive		Transaction ID : SA11AI.19561
City Sarasota	State FL	Zip Code 34236
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 526.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Albani, Rebecca, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 22 / 2020
Mailing Address 1909 n 82nd st		Transaction ID : SA11AI.19577
City Seattle	State WA	Zip Code 98103
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer (for Individual) Self	Occupation (for Individual) Art historian	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 203.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Albu, Emily, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 13 / 2020
Mailing Address 1413 Arena Drive		Transaction ID : SA11AI.19578
City Davis	State CA	Zip Code 95618
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) University of California	Occupation (for Individual) Classics professor	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 213.00	

SUBTOTAL of Receipts This Page (optional).....▶	165.00
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 7 OF 217
	<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. Allen, Amy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Op box 770
 City Honaunau State HI Zip Code 96726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not employed Occupation (for Individual) Not employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 05 / 2020
Transaction ID : SA11AI.19584
 Amount of Each Receipt this Period 150.00
 Memo Item

B. ashleman, russell, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10553 15th Ave Nw
 City Seattle State WA Zip Code 98177
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 07 / 2020
Transaction ID : SA11AI.19636
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Ballatore, Lynne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 404 Valley View Court
 City Dayton State NV Zip Code 89403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 07 / 2020
Transaction ID : SA11AI.19678
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	700.00
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 217
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Banks, Hannah, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 Garland Road
 City Newton State MA Zip Code 02459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) architect
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 10 / 14 / 2020
Transaction ID : SA11AI.19683
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Banks, Hannah, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 Garland Road
 City Newton State MA Zip Code 02459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) architect
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 10 / 17 / 2020
Transaction ID : SA11AI.19684
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Banks, Hannah, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 Garland Road
 City Newton State MA Zip Code 02459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) architect
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 10 / 20 / 2020
Transaction ID : SA11AI.19685
 Amount of Each Receipt this Period 50.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 217
	<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. Banks, Hannah, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 Garland Road
 City Newton State MA Zip Code 02459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) architect
 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
 10 / 28 / 2020
Transaction ID : SA11AI.19686
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. Banks, Hannah, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 Garland Road
 City Newton State MA Zip Code 02459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) architect
 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
 11 / 02 / 2020
Transaction ID : SA11AI.19687
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. Banks, Hannah, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 Garland Road
 City Newton State MA Zip Code 02459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) architect
 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
 11 / 05 / 2020
Transaction ID : SA11AI.19688
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 10 OF 217
	<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. Barron, Beverly, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 710 S Hanley Rd. #17C
 City St Louis State MO Zip Code 63105
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Not employed Occupation (for Individual) Not employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 10 / 22 / 2020
Transaction ID : SA11AI.19692
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Baxt, Saida, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 148 fox hill rd
 City Ancramdale State NY Zip Code 07024
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 05 / 2020
Transaction ID : SA11AI.19709
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Behar Johnson, Rebecca A., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1874 Fanwood Ave
 City Long Beach State CA Zip Code 90815
 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 10 / 21 / 2020
Transaction ID : SA11AI.19721
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
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 11 OF 217
	<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. Bell, Margaret, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4404 De La Cruz NW
 City Albuquerque State NM Zip Code 87107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Real estate
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 10 / 07 / 2020
Transaction ID : SA11AI.19724
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Bell, Margaret, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4404 De La Cruz NW
 City Albuquerque State NM Zip Code 87107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Real estate
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt 10 / 13 / 2020
Transaction ID : SA11AI.19725
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Bell, Margaret, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4404 De La Cruz NW
 City Albuquerque State NM Zip Code 87107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Real estate
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 10 / 17 / 2020
Transaction ID : SA11AI.19726
 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 12 OF 217
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Bell, Margaret, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4404 De La Cruz NW
 City Albuquerque State NM Zip Code 87107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Real estate
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 415.00

Date of Receipt 10 / 20 / 2020
Transaction ID : SA11AI.19727
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Bell, Margaret, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4404 De La Cruz NW
 City Albuquerque State NM Zip Code 87107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Real estate
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 440.00

Date of Receipt 10 / 21 / 2020
Transaction ID : SA11AI.19728
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Bell, Margaret, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4404 De La Cruz NW
 City Albuquerque State NM Zip Code 87107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Real estate
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 465.00

Date of Receipt 10 / 23 / 2020
Transaction ID : SA11AI.19729
 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 13 OF 217
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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

Mailing Address 4404 De La Cruz NW

City Albuquerque	State NM	Zip Code 87107
---------------------	-------------	-------------------

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

Name of Employer (for Individual) Self	Occupation (for Individual) Real estate
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
490.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2020

Transaction ID : SA11AI.19730

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 4404 De La Cruz NW

City Albuquerque	State NM	Zip Code 87107
---------------------	-------------	-------------------

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

Name of Employer (for Individual) Self	Occupation (for Individual) Real estate
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
515.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2020

Transaction ID : SA11AI.19731

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 4404 De La Cruz NW

City Albuquerque	State NM	Zip Code 87107
---------------------	-------------	-------------------

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

Name of Employer (for Individual) Self	Occupation (for Individual) Real estate
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
540.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2020

Transaction ID : SA11AI.19732

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 14 OF 217
	<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. Bell, Margaret, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4404 De La Cruz NW
 City Albuquerque State NM Zip Code 87107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Real estate
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 565.00

Date of Receipt
 11 / 02 / 2020
Transaction ID : SA11AI.19733
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Bell, Margaret, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4404 De La Cruz NW
 City Albuquerque State NM Zip Code 87107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Real estate
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 590.00

Date of Receipt
 11 / 05 / 2020
Transaction ID : SA11AI.19734
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Bell, Margaret, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4404 De La Cruz NW
 City Albuquerque State NM Zip Code 87107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Real estate
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 615.00

Date of Receipt
 11 / 07 / 2020
Transaction ID : SA11AI.19735
 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 15 OF 217
	<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. Bell, Margaret, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4404 De La Cruz NW

City Albuquerque	State NM	Zip Code 87107
---------------------	-------------	-------------------

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

Name of Employer (for Individual) Self	Occupation (for Individual) Real estate
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
640.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		09		2020

Transaction ID : SA11AI.19736

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 4404 De La Cruz NW

City Albuquerque	State NM	Zip Code 87107
---------------------	-------------	-------------------

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

Name of Employer (for Individual) Self	Occupation (for Individual) Real estate
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
665.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		14		2020

Transaction ID : SA11AI.19737

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 4404 De La Cruz NW

City Albuquerque	State NM	Zip Code 87107
---------------------	-------------	-------------------

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

Name of Employer (for Individual) Self	Occupation (for Individual) Real estate
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
690.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		21		2020

Transaction ID : SA11AI.19738

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 16 OF 217
	<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. Bell, Stewart, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 240 Lincoln St

City Astoria	State OR	Zip Code 97103
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2020

Transaction ID : SA11AI.19739

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 240 Lincoln St

City Astoria	State OR	Zip Code 97103
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
445.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		14		2020

Transaction ID : SA11AI.19740

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 2 Oak Circle

City Dover	State MA	Zip Code 02030
---------------	-------------	-------------------

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

Name of Employer (for Individual) Not employed	Occupation (for Individual) Not employed
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		17		2020

Transaction ID : SA11AI.19754

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	100.00
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 17 OF 217
<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. Black, Deborah, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2425 Hillside Ave
 City Berkeley State CA Zip Code 94704-2528
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 17 / 2020
Transaction ID : SA11AI.19772
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Black, Deborah, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2425 Hillside Ave
 City Berkeley State CA Zip Code 94704-2528
 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 10 / 23 / 2020
Transaction ID : SA11AI.19773
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Bollinger, Kay, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1440 34th St.
 City Allegan State MI Zip Code 49010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) none Occupation (for Individual) none
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 10 / 20 / 2020
Transaction ID : SA11AI.19796
 Amount of Each Receipt this Period 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	550.00
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 18 OF 217
	<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. Bollinger, Kay, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1440 34th St.

City Allegan	State MI	Zip Code 49010
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	22	/	2020

Transaction ID : SA11AI.19797

Amount of Each Receipt this Period
200.00

Memo Item

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

Mailing Address 975 Terrace Circle

City Colorado Springs	State CO	Zip Code 80904
--------------------------	-------------	-------------------

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

Name of Employer (for Individual) Sparks Willson Borges Brandt & Johnson	Occupation (for Individual) Attorney
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	05	/	2020

Transaction ID : SA11AI.19811

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 975 Terrace Circle

City Colorado Springs	State CO	Zip Code 80904
--------------------------	-------------	-------------------

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

Name of Employer (for Individual) Sparks Willson Borges Brandt & Johnson	Occupation (for Individual) Attorney
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2020

Transaction ID : SA11AI.19812

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	400.00
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 19 OF 217
<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. Borges, Kent, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 975 Terrace Circle

City Colorado Springs	State CO	Zip Code 80904
--------------------------	-------------	-------------------

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

Name of Employer (for Individual) Sparks Willson Borges Brandt & Johnson	Occupation (for Individual) Attorney
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 10 / 2020
Transaction ID : SA11AI.19813

Amount of Each Receipt this Period
 100.00

Memo Item

B. Borges, Kent, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 975 Terrace Circle

City Colorado Springs	State CO	Zip Code 80904
--------------------------	-------------	-------------------

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

Name of Employer (for Individual) Sparks Willson Borges Brandt & Johnson	Occupation (for Individual) Attorney
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 19 / 2020
Transaction ID : SA11AI.19814

Amount of Each Receipt this Period
 100.00

Memo Item

C. Brett, Maureen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16300 Van Aken Blvd

City Shaker Hts	State OH	Zip Code 44120
--------------------	-------------	-------------------

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

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
213.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2020
Transaction ID : SA11AI.19858

Amount of Each Receipt this Period
 38.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	238.00
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 20 OF 217
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Brett, Maureen, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16300 Van Aken Blvd

City Shaker Hts	State OH	Zip Code 44120
--------------------	-------------	-------------------

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 ▼
248.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2020

Transaction ID : SA11AI.19859

Amount of Each Receipt this Period
35.00

Memo Item

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

Mailing Address 9786 Treasure Cay Lane

City BONITA SPRINGS	State FL	Zip Code 34135
------------------------	-------------	-------------------

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

Name of Employer (for Individual) Centers for Arts Bonita Springs	Occupation (for Individual) President
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2020

Transaction ID : SA11AI.19874

Amount of Each Receipt this Period
30.00

Memo Item

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

Mailing Address 9786 Treasure Cay Lane

City BONITA SPRINGS	State FL	Zip Code 34135
------------------------	-------------	-------------------

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

Name of Employer (for Individual) Centers for Arts Bonita Springs	Occupation (for Individual) President
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
270.00

Date of Receipt

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

Transaction ID : SA11AI.19875

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	115.00
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 21 OF 217
	<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. Bridges, Susan, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9786 Treasure Cay Lane

City BONITA SPRINGS	State FL	Zip Code 34135
------------------------	-------------	-------------------

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

Name of Employer (for Individual) Centers for Arts Bonita Springs	Occupation (for Individual) President
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2020

Transaction ID : SA11AI.19876

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 9786 Treasure Cay Lane

City BONITA SPRINGS	State FL	Zip Code 34135
------------------------	-------------	-------------------

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

Name of Employer (for Individual) Centers for Arts Bonita Springs	Occupation (for Individual) President
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
370.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	17	/	2020

Transaction ID : SA11AI.19877

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 9786 Treasure Cay Lane

City BONITA SPRINGS	State FL	Zip Code 34135
------------------------	-------------	-------------------

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

Name of Employer (for Individual) Centers for Arts Bonita Springs	Occupation (for Individual) President
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
395.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2020

Transaction ID : SA11AI.19878

Amount of Each Receipt this Period
25.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 217
	<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. Bridges, Susan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9786 Treasure Cay Lane
 City BONITA SPRINGS State FL Zip Code 34135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Centers for Arts Bonita Springs Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 11 / 21 / 2020
Transaction ID : SA11AI.19879
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Brown, Laurena, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 269 Peckham Place
 City Encinitas State CA Zip Code 92024
 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 11 / 08 / 2020
Transaction ID : SA11AI.19905
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Brown, Laurena, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 269 Peckham Place
 City Encinitas State CA Zip Code 92024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not employed Occupation (for Individual) Not employed
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 21 / 2020
Transaction ID : SA11AI.19906
 Amount of Each Receipt this Period 50.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 217
	<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. Burns, Phoebe, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 193 Osborn St
 City Philadelphia State PA Zip Code 19128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) International SOS Occupation (for Individual) Data Analyst
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt 10 / 28 / 2020
Transaction ID : SA11AI.19933
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Burns, Phoebe, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 193 Osborn St
 City Philadelphia State PA Zip Code 19128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) International SOS Occupation (for Individual) Data Analyst
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt 10 / 30 / 2020
Transaction ID : SA11AI.19934
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Burns, Phoebe, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 193 Osborn St
 City Philadelphia State PA Zip Code 19128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) International SOS Occupation (for Individual) Data Analyst
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt 10 / 31 / 2020
Transaction ID : SA11AI.19935
 Amount of Each Receipt this Period 50.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 217
	<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. Burns, Phoebe, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 193 Osborn St
 City Philadelphia State PA Zip Code 19128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) International SOS Occupation (for Individual) Data Analyst
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt 11 / 08 / 2020
Transaction ID : SA11AI.19936
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Caban, Rafael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 706 S RAVEN RD
 City Shorewood State IL Zip Code 60404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 10 / 06 / 2020
Transaction ID : SA11AI.19950
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Caban, Rafael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 706 S RAVEN RD
 City Shorewood State IL Zip Code 60404
 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 ▼ 255.00

Date of Receipt 10 / 17 / 2020
Transaction ID : SA11AI.19951
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 25 OF 217
	<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. Caban, Rafael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 706 S RAVEN RD
 City Shorewood State IL Zip Code 60404
 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 ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2020
Transaction ID : SA11AI.19952
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Caban, Rafael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 706 S RAVEN RD
 City Shorewood State IL Zip Code 60404
 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 ▼ 305.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2020
Transaction ID : SA11AI.19953
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Caban, Rafael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 706 S RAVEN RD
 City Shorewood State IL Zip Code 60404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 19 / 2020
Transaction ID : SA11AI.19954
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	70.00
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 26 OF 217
	<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. Carsrud, Alan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26019 MASTERS PKWY
 City Spicewood State TX Zip Code 78669
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not employed Occupation (for Individual) Not employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 20 / 2020
Transaction ID : SA11AI.19996
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. Carsrud, Alan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26019 MASTERS PKWY
 City Spicewood State TX Zip Code 78669
 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
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2020
Transaction ID : SA11AI.19997
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. Casey, Clyde, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 135 Oak Forest Circle
 City Charlottesville State VA Zip Code 22901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US Government Occupation (for Individual) Economist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 07 / 2020
Transaction ID : SA11AI.19998
 Amount of Each Receipt this Period
 60.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	260.00
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 27 OF 217
	<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. Casey, Clyde, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 135 Oak Forest Circle
 City Charlottesville State VA Zip Code 22901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US Government Occupation (for Individual) Economist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt **10 / 20 / 2020**
Transaction ID : SA11AI.19999
 Amount of Each Receipt this Period 60.00
 Memo Item

B. Cawood, Anne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. Box 1772
 City SAN LEANDRO State CA Zip Code 94577
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Factor One inc Occupation (for Individual) managment consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **11 / 10 / 2020**
Transaction ID : SA11AI.20009
 Amount of Each Receipt this Period 200.00
 Memo Item

C. Cherney, Suzanne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 Plantation Circle
 City Naples State FL Zip Code 34104
 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 **10 / 14 / 2020**
Transaction ID : SA11AI.20023
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	360.00
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 28 OF 217
	<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. Cherney, Suzanne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 Plantation Circle
 City Naples State FL Zip Code 34104
 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 10 / 29 / 2020
Transaction ID : SA11AI.20024
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Cherney, Suzanne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 Plantation Circle
 City Naples State FL Zip Code 34104
 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 ▼ 375.00

Date of Receipt 11 / 05 / 2020
Transaction ID : SA11AI.20025
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Cherney, Suzanne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 Plantation Circle
 City Naples State FL Zip Code 34104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 11 / 05 / 2020
Transaction ID : SA11AI.20026
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	400.00
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 29 OF 217
	<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. Cleland, Katherine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5540 29th Ave NE
 City Seattle State WA Zip Code 98105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) marketing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 13 / 2020
Transaction ID : SA11AI.20045
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. Cleland, Katherine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5540 29th Ave NE
 City Seattle State WA Zip Code 98105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) marketing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 13 / 2020
Transaction ID : SA11AI.20046
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. COE, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 206 HEATHER LN
 City COLUMBIA State MO Zip Code 65203-1322
 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 ▼ 439.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2020
Transaction ID : SA11AI.20059
 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 30 OF 217
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. COE, EDWARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 206 HEATHER LN
 City COLUMBIA State MO Zip Code 65203-1322
 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 ▼ 539.00

Date of Receipt
 11 / 11 / 2020
Transaction ID : SA11AI.20060
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. Cohen, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 308 Mesa Rd.
 City Santa Monica State CA Zip Code 90402
 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 ▼ 350.00

Date of Receipt
 10 / 10 / 2020
Transaction ID : SA11AI.20064
 Amount of Each Receipt this Period
 200.00
 Memo Item

C. Cohen, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 308 Mesa Rd.
 City Santa Monica State CA Zip Code 90402
 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 ▼ 550.00

Date of Receipt
 10 / 17 / 2020
Transaction ID : SA11AI.20065
 Amount of Each Receipt this Period
 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	500.00
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 31 OF 217
	<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. Cohen, Paul, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38 Payson Terrace
 City Belmont State MA Zip Code 02478
 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 ▼ 430.00

Date of Receipt 10 / 23 / 2020
Transaction ID : SA11AI.20068
 Amount of Each Receipt this Period 20.00
 Memo Item

B. Contardo, Nicolina, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1313 Silver Court
 City HAMILTON SQUARE State NJ Zip Code 08690
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) source4teachers Occupation (for Individual) substitute teacher
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 01 / 2020
Transaction ID : SA11AI.20104
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Contardo, Nicolina, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1313 Silver Court
 City HAMILTON SQUARE State NJ Zip Code 08690
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) source4teachers Occupation (for Individual) substitute teacher
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 05 / 2020
Transaction ID : SA11AI.20105
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	70.00
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 32 OF 217
	<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. Cornell, Erik, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3518 Tide Water Dr
 City Evans State CO Zip Code 80620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UFCW Occupation (for Individual) Union Representative
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 01 / 2020
Transaction ID : SA11AI.20124
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Cornell, Erik, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3518 Tide Water Dr
 City Evans State CO Zip Code 80620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UFCW Occupation (for Individual) Union Representative
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 21 / 2020
Transaction ID : SA11AI.20125
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Cote, Denis, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 163 Four Rod Road
 City Rochester State NH Zip Code 03867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 22 / 2020
Transaction ID : SA11AI.20132
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
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 33 OF 217
	<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. Crane, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7777 Fox Tail Court
 City Highland State CA Zip Code 92346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Christian Counseling Service Occupation (for Individual) Retired Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 10 / 07 / 2020
Transaction ID : SA11AI.20139
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Crane, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7777 Fox Tail Court
 City Highland State CA Zip Code 92346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Christian Counseling Service Occupation (for Individual) Retired Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 470.00

Date of Receipt 10 / 17 / 2020
Transaction ID : SA11AI.20140
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Crane, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7777 Fox Tail Court
 City Highland State CA Zip Code 92346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Christian Counseling Service Occupation (for Individual) Retired Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt 11 / 18 / 2020
Transaction ID : SA11AI.20141
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
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 217
	<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. Cuppett, Dona, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 Highview Drive
 City Telford State PA Zip Code 18969
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 28 / 2020
Transaction ID : SA11AI.20157
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Cuppett, Dona, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 Highview Drive
 City Telford State PA Zip Code 18969
 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 11 / 18 / 2020
Transaction ID : SA11AI.20158
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Dicterow, Julie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31 Castle Rd
 City Piermont State NY Zip Code 10968
 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 ▼ 232.00

Date of Receipt 11 / 07 / 2020
Transaction ID : SA11AI.20234
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
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 35 OF 217
	<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. Donaghue, Rosemary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 434 3rd Ave S #C102
 City Edmonds State WA Zip Code 98020
 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 ▼ 229.00

Date of Receipt 11 / 02 / 2020
Transaction ID : SA11AI.20258
 Amount of Each Receipt this Period 59.00
 Memo Item

B. Donaghue, Rosemary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 434 3rd Ave S #C102
 City Edmonds State WA Zip Code 98020
 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 ▼ 254.00

Date of Receipt 11 / 02 / 2020
Transaction ID : SA11AI.20259
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Donaghue, Rosemary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 434 3rd Ave S #C102
 City Edmonds State WA Zip Code 98020
 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 ▼ 274.00

Date of Receipt 11 / 05 / 2020
Transaction ID : SA11AI.20260
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 104.00
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 36 OF 217
	<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. Donaghue, Rosemary, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 434 3rd Ave S #C102

City Edmonds	State WA	Zip Code 98020
-----------------	-------------	-------------------

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 ▼
304.00

Date of Receipt
11 / 22 / 2020
Transaction ID : SA11AI.20261

Amount of Each Receipt this Period
30.00

Memo Item

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

Mailing Address 4420 N CLYBOURN AVE

City BURBANK	State CA	Zip Code 91505-4005
-----------------	-------------	------------------------

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 ▼
1600.00

Date of Receipt
10 / 16 / 2020
Transaction ID : SA11AI.20268

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 4420 N CLYBOURN AVE

City BURBANK	State CA	Zip Code 91505-4005
-----------------	-------------	------------------------

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
10 / 20 / 2020
Transaction ID : SA11AI.20269

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	630.00
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 37 OF 217
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Dooley, Paul, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4420 N CLYBOURN AVE
 City BURBANK State CA Zip Code 91505-4005
 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 10 / 30 / 2020
Transaction ID : SA11AI.20270
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Dooley, Paul, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4420 N CLYBOURN AVE
 City BURBANK State CA Zip Code 91505-4005
 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 ▼ 2700.00

Date of Receipt 11 / 02 / 2020
Transaction ID : SA11AI.20271
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Dooley, Paul, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4420 N CLYBOURN AVE
 City BURBANK State CA Zip Code 91505-4005
 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 ▼ 3200.00

Date of Receipt 11 / 10 / 2020
Transaction ID : SA11AI.20272
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1100.00
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 38 OF 217
	<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. Dooley, Winifred, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4420 n. clybourn
 City burbank State CA Zip Code 91505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) writer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 14 / 2020
Transaction ID : SA11AI.20273
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. Dooley, Winifred, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4420 n. clybourn
 City burbank State CA Zip Code 91505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) writer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 17 / 2020
Transaction ID : SA11AI.20274
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. Dooley, Winifred, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4420 n. clybourn
 City burbank State CA Zip Code 91505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) writer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2020
Transaction ID : SA11AI.20275
 Amount of Each Receipt this Period
 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1250.00
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 39 OF 217
	<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. Dooley, Winifred, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4420 n. clybourn
 City burbank State CA Zip Code 91505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) writer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5100.00

Date of Receipt 10 / 28 / 2020
Transaction ID : SA11AI.20276
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Dooley, Winifred, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4420 n. clybourn
 City burbank State CA Zip Code 91505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) writer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5600.00

Date of Receipt 10 / 31 / 2020
Transaction ID : SA11AI.20277
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Dooley, Winifred, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4420 n. clybourn
 City burbank State CA Zip Code 91505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) writer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 6100.00

Date of Receipt 11 / 02 / 2020
Transaction ID : SA11AI.20278
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
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 40 OF 217
	<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. Dooley, Winifred, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4420 n. clybourn
 City burbank State CA Zip Code 91505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) writer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 6200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2020
Transaction ID : SA11AI.20279
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. Dooley, Winifred, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4420 n. clybourn
 City burbank State CA Zip Code 91505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) writer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 6450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2020
Transaction ID : SA11AI.20280
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. Dooley, Winifred, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4420 n. clybourn
 City burbank State CA Zip Code 91505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) writer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 6950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 09 / 2020
Transaction ID : SA11AI.20281
 Amount of Each Receipt this Period
 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	850.00
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 41 OF 217
	<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. Dooley, Winifred, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4420 n. clybourn
 City burbank State CA Zip Code 91505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) writer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 7450.00

Date of Receipt
 11 / 10 / 2020
Transaction ID : SA11AI.20282
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. Dooley, Winifred, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4420 n. clybourn
 City burbank State CA Zip Code 91505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) writer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 7950.00

Date of Receipt
 11 / 13 / 2020
Transaction ID : SA11AI.20283
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. Dooley, Winifred, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4420 n. clybourn
 City burbank State CA Zip Code 91505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) writer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 8450.00

Date of Receipt
 11 / 17 / 2020
Transaction ID : SA11AI.20284
 Amount of Each Receipt this Period
 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
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 42 OF 217
	<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. Dooley, Winifred, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4420 n. clybourn
 City burbank State CA Zip Code 91505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) writer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 8950.00

Date of Receipt 11 / 20 / 2020
Transaction ID : SA11AI.20285
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Dorman, Jennie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1231 Portland Ave
 City Albany State CA Zip Code 94706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 05 / 2020
Transaction ID : SA11AI.20287
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Dragon, Carol, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 800 Deerfield Road #305
 City Highland Park State IL Zip Code 60035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not employed Occupation (for Individual) Not employed
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 13 / 2020
Transaction ID : SA11AI.20292
 Amount of Each Receipt this Period 150.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	900.00
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 43 OF 217
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Dragon, Carol, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 800 Deerfield Road #305
 City Highland Park State IL Zip Code 60035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not employed Occupation (for Individual) Not employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 11 / 2020
Transaction ID : SA11AI.20293
 Amount of Each Receipt this Period 150.00
 Memo Item

B. Dragon, Carol, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 800 Deerfield Road #305
 City Highland Park State IL Zip Code 60035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not employed Occupation (for Individual) Not employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 11 / 21 / 2020
Transaction ID : SA11AI.20294
 Amount of Each Receipt this Period 150.00
 Memo Item

C. Dufour, Joel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 660 Mt. Vernon Rd.
 City Frankfort State KY Zip Code 40601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Earth Tools Inc. Occupation (for Individual) business owner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 19 / 2020
Transaction ID : SA11AI.20303
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	400.00
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 44 OF 217
	<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. Dufour, Joel, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 660 Mt. Vernon Rd.

City Frankfort	State KY	Zip Code 40601
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Earth Tools Inc.	Occupation (for Individual) business owner
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2020

Transaction ID : SA11AI.20304

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 660 Mt. Vernon Rd.

City Frankfort	State KY	Zip Code 40601
-------------------	-------------	-------------------

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

Name of Employer (for Individual) Earth Tools Inc.	Occupation (for Individual) business owner
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
370.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2020

Transaction ID : SA11AI.20305

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 660 Mt. Vernon Rd.

City Frankfort	State KY	Zip Code 40601
-------------------	-------------	-------------------

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

Name of Employer (for Individual) Earth Tools Inc.	Occupation (for Individual) business owner
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
470.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2020

Transaction ID : SA11AI.20306

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	250.00
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 45 OF 217
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Dufour, Joel, , ,		Date of Receipt
Mailing Address 660 Mt. Vernon Rd.		<input type="text" value="11"/> / <input type="text" value="21"/> / <input type="text" value="2020"/>
City Frankfort	State KY	Zip Code 40601
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.20307
Name of Employer (for Individual) Earth Tools Inc.		Occupation (for Individual) business owner
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="100.00"/>
<input type="text" value="570.00"/>		<input type="checkbox"/> Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Edwards, Jon, , ,		Date of Receipt
Mailing Address PO Box 715		<input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2020"/>
City South Freeport	State ME	Zip Code 04078
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.20337
Name of Employer (for Individual) Self		Occupation (for Individual) Attorney
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="25.00"/>
<input type="text" value="800.00"/>		<input type="checkbox"/> Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Edwards, Jon, , ,		Date of Receipt
Mailing Address PO Box 715		<input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2020"/>
City South Freeport	State ME	Zip Code 04078
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.20338
Name of Employer (for Individual) Self		Occupation (for Individual) Attorney
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="100.00"/>
<input type="text" value="900.00"/>		<input type="checkbox"/> Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="225.00"/>
TOTAL 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 46 OF 217
<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. 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 ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2020
Transaction ID : SA11AI.20339

Amount of Each Receipt this Period
 100.00

Memo Item

B. Edwards, Jon, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 715

City South Freeport	State ME	Zip Code 04078
------------------------	-------------	-------------------

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

Name of Employer (for Individual) Self	Occupation (for Individual) Attorney
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1025.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2020
Transaction ID : SA11AI.20340

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
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2020
Transaction ID : SA11AI.20341

Amount of Each Receipt this Period
 250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	375.00
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 47 OF 217
<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. Emerson, C Shelley, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20221 La Paloma Avenue
 City Saratoga State CA Zip Code 95070
 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 ▼ 345.00

Date of Receipt **10 / 28 / 2020**
Transaction ID : SA11AI.20367
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Emerson, C Shelley, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20221 La Paloma Avenue
 City Saratoga State CA Zip Code 95070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt **11 / 01 / 2020**
Transaction ID : SA11AI.20368
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Emerson, C Shelley, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20221 La Paloma Avenue
 City Saratoga State CA Zip Code 95070
 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 ▼ 420.00

Date of Receipt **11 / 05 / 2020**
Transaction ID : SA11AI.20369
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	100.00
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 48 OF 217
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Emerson, C Shelley, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20221 La Paloma Avenue
 City Saratoga State CA Zip Code 95070
 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 ▼ 470.00

Date of Receipt 11 / 08 / 2020
Transaction ID : SA11AI.20370
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Emerson, C Shelley, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20221 La Paloma Avenue
 City Saratoga State CA Zip Code 95070
 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 ▼ 520.00

Date of Receipt 11 / 14 / 2020
Transaction ID : SA11AI.20371
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Ferrell, William R, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4091 E Third St
 City Tucson State AZ Zip Code 85711-1901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 17 / 2020
Transaction ID : SA11AI.20417
 Amount of Each Receipt this Period 200.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 49 OF 217 (check only one)
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
fite, austin, , ,

Mailing Address 1474 Paseo de Oro

City pacific Palisades	State CA	Zip Code 90272
---------------------------	-------------	-------------------

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

Name of Employer (for Individual) healthcare partners	Occupation (for Individual) physician
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		14		2020

Transaction ID : SA11AI.20436

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 1474 Paseo de Oro

City pacific Palisades	State CA	Zip Code 90272
---------------------------	-------------	-------------------

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

Name of Employer (for Individual) healthcare partners	Occupation (for Individual) physician
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		18		2020

Transaction ID : SA11AI.20437

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 1474 Paseo de Oro

City pacific Palisades	State CA	Zip Code 90272
---------------------------	-------------	-------------------

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

Name of Employer (for Individual) healthcare partners	Occupation (for Individual) physician
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		22		2020

Transaction ID : SA11AI.20438

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	300.00
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 50 OF 217
<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. fite, austin, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1474 Paseo de Oro

City pacific Palisades	State CA	Zip Code 90272
---------------------------	-------------	-------------------

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

Name of Employer (for Individual) healthcare partners	Occupation (for Individual) physician
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	18	/	2020

Transaction ID : SA11AI.20439

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 1474 Paseo de Oro

City pacific Palisades	State CA	Zip Code 90272
---------------------------	-------------	-------------------

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

Name of Employer (for Individual) healthcare partners	Occupation (for Individual) physician
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2020

Transaction ID : SA11AI.20440

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 1068 N Eagle Hollow Rd

City Green Valley	State AZ	Zip Code 85614
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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 ▼
1600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	01	/	2020

Transaction ID : SA11AI.20447

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	700.00
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 51 OF 217
	<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. Fluhrer, Patricia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1068 N Eagle Hollow Rd
 City Green Valley State AZ Zip Code 85614
 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 ▼ 1700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 17 / 2020
Transaction ID : SA11AI.20448
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. Fluhrer, Patricia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1068 N Eagle Hollow Rd
 City Green Valley State AZ Zip Code 85614
 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 ▼ 1800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2020
Transaction ID : SA11AI.20449
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. Fluhrer, Patricia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1068 N Eagle Hollow Rd
 City Green Valley State AZ Zip Code 85614
 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 ▼ 2300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2020
Transaction ID : SA11AI.20450
 Amount of Each Receipt this Period
 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	700.00
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 52 OF 217
	<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. Forbes-Watkins, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45 Main Street Apt 2A
 City Hastings-on-Hudson State NY Zip Code 10706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 05 / 2020
Transaction ID : SA11AI.20454
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Gallie Jewett, Brenda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 Rose Av
 City Toronto State ZZ Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SickKids Hospital Occupation (for Individual) MD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 10 / 09 / 2020
Transaction ID : SA11AI.19548
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Gallie Jewett, Brenda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 Rose Av
 City Toronto State ZZ Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SickKids Hospital Occupation (for Individual) MD
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 09 / 2020
Transaction ID : SA11AI.19549
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	100.00
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 53 OF 217
	<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. Gardner, Debra, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 336 E Church St
 City Frederick State MD Zip Code 21701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Public Justice Center Occupation (for Individual) lawyer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 22 / 2020
Transaction ID : SA11AI.20492
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Geisler, Jennifer, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 Vista Way
 City Bloomfield State CT Zip Code 06002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 05 / 2020
Transaction ID : SA11AI.20500
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Gerhard, Walter, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 West Sunset Avenue
 City Philadelphia State PA Zip Code 19118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 05 / 2020
Transaction ID : SA11AI.20508
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1200.00
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 54 OF 217
	(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. Gerhard, Walter, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 West Sunset Avenue
 City Philadelphia State PA Zip Code 19118
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 11 / 05 / 2020
Transaction ID : SA11AI.20509
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. Goddard, Karen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 195 Dapplegray Rd
 City Bell Canyon State CA Zip Code 91307
 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 ▼ 1000.00

Date of Receipt
 10 / 31 / 2020
Transaction ID : SA11AI.20540
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. Goldsmith, Sandy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 768 27th Street
 City Manhattan Beach State CA Zip Code 90266
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 10 / 31 / 2020
Transaction ID : SA11AI.20561
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
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 55 OF 217
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Greenberger, Cecilia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9342 Johnson Point Rd NE
 City Olympia State WA Zip Code 98516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2020
Transaction ID : SA11AI.20592
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. Greenberger, Cecilia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9342 Johnson Point Rd NE
 City Olympia State WA Zip Code 98516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2020
Transaction ID : SA11AI.20593
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. Grigsby, Phillip, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1638 Avenue A
 City SCHENECTADY State NY Zip Code 12308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SICM Occupation (for Individual) Clergy
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2020
Transaction ID : SA11AI.20613
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 56 OF 217
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Grigsby, Phillip, , ,		Date of Receipt MM / DD / YYYY 11 / 19 / 2020 Transaction ID : SA11AI.20614
Mailing Address 1638 Avenue A		Amount of Each Receipt this Period 100.00
City SCHENECTADY	State NY	Zip Code 12308
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) SICM	Occupation (for Individual) Clergy	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Guthman, Les, , ,		Date of Receipt MM / DD / YYYY 10 / 14 / 2020 Transaction ID : SA11AI.20633
Mailing Address 250 W. 85th St. 14H		Amount of Each Receipt this Period 500.00
City New York	State NY	Zip Code 10024
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) XPLR Productions	Occupation (for Individual) Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. GUTHRIE, BARRETT, , ,		Date of Receipt MM / DD / YYYY 10 / 18 / 2020 Transaction ID : SA11AI.20635
Mailing Address 31011 N 56th Street		Amount of Each Receipt this Period 1000.00
City Cave Creek	State AZ	Zip Code 85331
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) none	Occupation (for Individual) Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional).....▶	1600.00
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 57 OF 217
	<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. Hardin, Gina, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3330 w 31st ave
 City Denver State CO Zip Code 80211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Hospitality
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 19 / 2020
Transaction ID : SA11AI.20666
 Amount of Each Receipt this Period 50.00
 Memo Item

B. 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 ▼ 900.00

Date of Receipt 10 / 01 / 2020
Transaction ID : SA11AI.20667
 Amount of Each Receipt this Period 250.00
 Memo Item

C. 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 ▼ 1150.00

Date of Receipt 10 / 14 / 2020
Transaction ID : SA11AI.20668
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	550.00
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 58 OF 217
	(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 ▼ 1250.00

Date of Receipt 10 / 23 / 2020
Transaction ID : SA11AI.20669
 Amount of Each Receipt this Period 100.00
 Memo Item

B. hegehan, elizabeth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 riverside drive
 City ny State NY Zip Code 10024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 445.00

Date of Receipt 10 / 23 / 2020
Transaction ID : SA11AI.20693
 Amount of Each Receipt this Period 50.00
 Memo Item

C. hegehan, elizabeth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 riverside drive
 City ny State NY Zip Code 10024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 545.00

Date of Receipt 10 / 27 / 2020
Transaction ID : SA11AI.20692
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	250.00
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 59 OF 217
	<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. Henson, Ruth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9153 E Evans Way
 City Denver State CO Zip Code 80231
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self employed Occupation (for Individual) Intl development manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 11 / 05 / 2020
Transaction ID : SA11AI.20715
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Hobbs, Ann, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9002 Bradford Rd
 City Silver Spring State MD Zip Code 20901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 11 / 02 / 2020
Transaction ID : SA11AI.20741
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Hobbs, Ann, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9002 Bradford Rd
 City Silver Spring State MD Zip Code 20901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 11 / 05 / 2020
Transaction ID : SA11AI.20742
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	200.00
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 60 OF 217
	(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. Hobbs, Ann, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9002 Bradford Rd
 City Silver Spring State MD Zip Code 20901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 11 / 21 / 2020
Transaction ID : SA11AI.20743
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Hubenette, Lynne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 707 Sunset Ln
 City Soquel State CA Zip Code 95073
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 19 / 2020
Transaction ID : SA11AI.20782
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Huyler, Stephen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 Sea Street
 City Camden State ME Zip Code 04843
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 07 / 2020
Transaction ID : SA11AI.20791
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	625.00
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 61 OF 217
	<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. Irwin, Ken, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1229 W Roscoe St
 City Chicago State IL Zip Code 60657
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 29 / 2020
Transaction ID : SA11AI.20797
 Amount of Each Receipt this Period 250.00
 Memo Item

B. ives, j.atwood, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1010 Waltham St#598
 City Lexington State MA Zip Code 02421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 10 / 07 / 2020
Transaction ID : SA11AI.20800
 Amount of Each Receipt this Period 25.00
 Memo Item

C. ives, j.atwood, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1010 Waltham St#598
 City Lexington State MA Zip Code 02421
 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 ▼ 725.00

Date of Receipt 10 / 07 / 2020
Transaction ID : SA11AI.20801
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
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 62 OF 217
	(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. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ives, j.atwood, , ,

Mailing Address 1010 Waltham St#598

City Lexington	State MA	Zip Code 02421
-------------------	-------------	-------------------

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 ▼
775.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2020

Transaction ID : SA11AI.20802

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 1010 Waltham St#598

City Lexington	State MA	Zip Code 02421
-------------------	-------------	-------------------

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 ▼
825.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2020

Transaction ID : SA11AI.20803

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 1010 Waltham St#598

City Lexington	State MA	Zip Code 02421
-------------------	-------------	-------------------

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 ▼
875.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2020

Transaction ID : SA11AI.20804

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
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 63 OF 217
	(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. ives, j.atwood, , ,			Date of Receipt
Mailing Address 1010 Waltham St#598			<input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2020"/>
City Lexington	State MA	Zip Code 02421	Transaction ID : SA11AI.20805
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="50.00"/>
Name of Employer (for Individual) Not Employed		Occupation (for Individual) Not Employed	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="925.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. ives, j.atwood, , ,			Date of Receipt
Mailing Address 1010 Waltham St#598			<input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2020"/>
City Lexington	State MA	Zip Code 02421	Transaction ID : SA11AI.20806
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="40.00"/>
Name of Employer (for Individual) Not Employed		Occupation (for Individual) Not Employed	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="965.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. ives, j.atwood, , ,			Date of Receipt
Mailing Address 1010 Waltham St#598			<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2020"/>
City Lexington	State MA	Zip Code 02421	Transaction ID : SA11AI.20807
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="50.00"/>
Name of Employer (for Individual) Not Employed		Occupation (for Individual) Not Employed	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="1015.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="140.00"/>
TOTAL 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 64 OF 217
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ives, j.atwood, , ,

Mailing Address 1010 Waltham St#598

City Lexington	State MA	Zip Code 02421
-------------------	-------------	-------------------

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 ▼
1065.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 02 / 2020

Transaction ID : SA11AI.20808

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 1010 Waltham St#598

City Lexington	State MA	Zip Code 02421
-------------------	-------------	-------------------

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 ▼
1115.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 02 / 2020

Transaction ID : SA11AI.20809

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 1010 Waltham St#598

City Lexington	State MA	Zip Code 02421
-------------------	-------------	-------------------

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 ▼
1165.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 07 / 2020

Transaction ID : SA11AI.20810

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
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 65 OF 217
	(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. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ives, j.atwood, , ,

Mailing Address 1010 Waltham St#598

City Lexington	State MA	Zip Code 02421
-------------------	-------------	-------------------

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 ▼
1215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		08		2020

Transaction ID : SA11AI.20811

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 1010 Waltham St#598

City Lexington	State MA	Zip Code 02421
-------------------	-------------	-------------------

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 ▼
1265.00

Date of Receipt

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

Transaction ID : SA11AI.20812

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 1010 Waltham St#598

City Lexington	State MA	Zip Code 02421
-------------------	-------------	-------------------

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 ▼
1315.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2020

Transaction ID : SA11AI.20813

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
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 66 OF 217
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ives, j.atwood, , ,

Mailing Address 1010 Waltham St#598

City Lexington	State MA	Zip Code 02421
-------------------	-------------	-------------------

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 ▼
1365.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	18	/	2020

Transaction ID : SA11AI.20814

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 1010 Waltham St#598

City Lexington	State MA	Zip Code 02421
-------------------	-------------	-------------------

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 ▼
1415.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2020

Transaction ID : SA11AI.20815

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 1010 Waltham St#598

City Lexington	State MA	Zip Code 02421
-------------------	-------------	-------------------

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 ▼
1465.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	22	/	2020

Transaction ID : SA11AI.20816

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 67 OF 217
	<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. Jacobs, Jeffrey, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 328 Virginia Ave
 City Collingswood State NJ Zip Code 08108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt
 11 / 02 / 2020
Transaction ID : SA11AI.20822
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. Jacobs, Jeffrey, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 328 Virginia Ave
 City Collingswood State NJ Zip Code 08108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt
 11 / 08 / 2020
Transaction ID : SA11AI.20825
 Amount of Each Receipt this Period
 75.00
 Memo Item

C. Joseph, Margaret, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 Sunnyland Dr.
 City San Antonio State TX Zip Code 78228
 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 ▼ 322.00

Date of Receipt
 10 / 11 / 2020
Transaction ID : SA11AI.20872
 Amount of Each Receipt this Period
 47.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	172.00
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 68 OF 217
	<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. Joseph, Margaret, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 Sunnyland Dr.
 City San Antonio State TX Zip Code 78228
 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 ▼ 369.00

Date of Receipt 11 / 11 / 2020
Transaction ID : SA11AI.20873
 Amount of Each Receipt this Period 47.00
 Memo Item

B. Keach, Barbara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 Hemlock Lane
 City Bay Shore State NY Zip Code 11706
 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 ▼ 204.00

Date of Receipt 11 / 02 / 2020
Transaction ID : SA11AI.20922
 Amount of Each Receipt this Period 38.00
 Memo Item

C. Keach, Barbara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 Hemlock Lane
 City Bay Shore State NY Zip Code 11706
 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 ▼ 242.00

Date of Receipt 11 / 05 / 2020
Transaction ID : SA11AI.20923
 Amount of Each Receipt this Period 38.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	123.00
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 69 OF 217
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Keach, Barbara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 Hemlock Lane
 City Bay Shore State NY Zip Code 11706
 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 ▼ 268.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 22 / 2020
Transaction ID : SA11AI.20924
 Amount of Each Receipt this Period
 26.00
 Memo Item

B. Kenning, Douglas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 324 Wilson Street
 City Petaluma State CA Zip Code 94952
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2020
Transaction ID : SA11AI.20934
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. Knapp, Suzanne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 129 E Main St. Apt 333
 City Westborough State MA Zip Code 01581
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 07 / 2020
Transaction ID : SA11AI.20968
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	76.00
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 70 OF 217
	<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. Knapp, Suzanne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 129 E Main St. Apt 333
 City Westborough State MA Zip Code 01581
 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 ▼ 825.00

Date of Receipt 10 / 30 / 2020
Transaction ID : SA11AI.20969
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Knapp, Suzanne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 129 E Main St. Apt 333
 City Westborough State MA Zip Code 01581
 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 ▼ 850.00

Date of Receipt 11 / 07 / 2020
Transaction ID : SA11AI.20970
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Kousser, J Morgan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1818 Craig Ave.
 City Altadena State CA Zip Code 91001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Calif. Institute of Technology Occupation (for Individual) History Prof.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 21 / 2020
Transaction ID : SA11AI.20989
 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 71 OF 217
	<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. Krawisz, Bruce, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1600 N Hills Dr.
 City Marshfield State WI Zip Code 54449
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Marshfield Clinic Research Institute Occupation (for Individual) emeritus researcher
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 14 / 2020
Transaction ID : SA11AI.21006
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Krawisz, Bruce, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1600 N Hills Dr.
 City Marshfield State WI Zip Code 54449
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Marshfield Clinic Research Institute Occupation (for Individual) emeritus researcher
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 28 / 2020
Transaction ID : SA11AI.21007
 Amount of Each Receipt this Period 100.00
 Memo Item

C. kwak, james, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1001 san pablo ne
 City albuquerque State NM Zip Code 87110
 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 11 / 17 / 2020
Transaction ID : SA11AI.21032
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
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 72 OF 217
	<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. kwak, james, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1001 san pablo ne

City albuquerque	State NM	Zip Code 87110
---------------------	-------------	-------------------

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

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	19	/	2020

Transaction ID : SA11AI.21033

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 308 West State Street

City Ithaca	State NY	Zip Code 14850
----------------	-------------	-------------------

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

Name of Employer (for Individual) ITCTC	Occupation (for Individual) Transportation Analyst
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2020

Transaction ID : SA11AI.21047

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 308 West State Street

City Ithaca	State NY	Zip Code 14850
----------------	-------------	-------------------

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

Name of Employer (for Individual) ITCTC	Occupation (for Individual) Transportation Analyst
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
675.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2020

Transaction ID : SA11AI.21048

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	325.00
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 73 OF 217
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Lambrix, Jay, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 308 West State Street
 City Ithaca State NY Zip Code 14850
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ITCTC Occupation (for Individual) Transportation Analyst
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt 11 / 03 / 2020
Transaction ID : SA11AI.21049
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Lebowitz, Jacob, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5911 Lone Oak Dr.
 City Bethesda State MD Zip Code 20814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) none Occupation (for Individual) retired scientist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 436.00

Date of Receipt 10 / 12 / 2020
Transaction ID : SA11AI.21072
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Lebowitz, Jacob, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5911 Lone Oak Dr.
 City Bethesda State MD Zip Code 20814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) none Occupation (for Individual) retired scientist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 461.00

Date of Receipt 11 / 12 / 2020
Transaction ID : SA11AI.21073
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	100.00
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 74 OF 217
<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. Leihbacher, Doug, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 412 Benedict Avenue
 City Tarrytown State NY Zip Code 10591
 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 ▼ 1185.00

Date of Receipt 10 / 02 / 2020
Transaction ID : SA11AI.21100
 Amount of Each Receipt this Period 40.00
 Memo Item

B. Leo, Victoria, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 350 Mobile Dr
 City Ashland State OR Zip Code 97520
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 10 / 2020
Transaction ID : SA11AI.21109
 Amount of Each Receipt this Period 50.00
 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 ▼ 1050.00

Date of Receipt 10 / 30 / 2020
Transaction ID : SA11AI.21112
 Amount of Each Receipt this Period 150.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	240.00
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 75 OF 217
	<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 ▼ 210.00

Date of Receipt 10 / 28 / 2020
Transaction ID : SA11AI.21130
 Amount of Each Receipt this Period 20.00
 Memo Item

B. Lindvig, Marilyn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3691 Rosebrook Court
 City Concord State CA Zip Code 94518
 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 ▼ 1000.00

Date of Receipt 11 / 11 / 2020
Transaction ID : SA11AI.21136
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Livingston, Lauren, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 Digges Road
 City Asheville State NC Zip Code 28805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Community Family Practice Occupation (for Individual) physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 11 / 2020
Transaction ID : SA11AI.21146
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1520.00
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 76 OF 217
	<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. Livingston, Lauren, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 Digges Road
 City Asheville State NC Zip Code 28805
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Community Family Practice Occupation (for Individual) physician
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1000.00

Date of Receipt 10 / 21 / 2020
Transaction ID : SA11AI.21147
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Lord, Henry, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 313 Audubon Court
 City New Haven State CT Zip Code 06510
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Self Occupation (for Individual) Investor
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 500.00

Date of Receipt 10 / 25 / 2020
Transaction ID : SA11AI.21160
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Lustgarten, Steve, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28 Hanover Court
 City Santa Cruz State CA Zip Code 95062
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) nonprofit Occupation (for Individual) manager
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 450.00

Date of Receipt 10 / 28 / 2020
Transaction ID : SA11AI.21185
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1050.00
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 77 OF 217
	<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. Lustgarden, Steve, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28 Hanover Court
 City Santa Cruz State CA Zip Code 95062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) nonprofit Occupation (for Individual) manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 19 / 2020
Transaction ID : SA11AI.21186
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MacKenzie, Alison, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 29176 Ricks Landing Rd.
 City Kennedyville State MD Zip Code 21645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Marketing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 22 / 2020
Transaction ID : SA11AI.21209
 Amount of Each Receipt this Period 25.00
 Memo Item

C. MacKenzie, Alison, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 29176 Ricks Landing Rd.
 City Kennedyville State MD Zip Code 21645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Marketing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 22 / 2020
Transaction ID : SA11AI.21210
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	100.00
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 78 OF 217
	<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. Mandell, Charles, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2298 Northwest 60th Street
 City Boca Raton State FL Zip Code 33496
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2020
Transaction ID : SA11AI.21227
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. Mandell, Charles, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2298 Northwest 60th Street
 City Boca Raton State FL Zip Code 33496
 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 ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2020
Transaction ID : SA11AI.21228
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. Mandell, Charles, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2298 Northwest 60th Street
 City Boca Raton State FL Zip Code 33496
 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 ▼ 305.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 10 / 2020
Transaction ID : SA11AI.21229
 Amount of Each Receipt this Period
 50.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 217
	<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. Manning, Marcy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 E. Poplar Rd.
 City Sterling State VA Zip Code 20164
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The World's Best Prep Course Inc. Occupation (for Individual) corporation president
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 22 / 2020
Transaction ID : SA11AI.21237
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Margolis, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 129 Euclid Blvd
 City Lantana State FL Zip Code 33462
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 08 / 2020
Transaction ID : SA11AI.21244
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Marsh, Donna, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1808 glen Ellen rd
 City Sioux City State IA Zip Code 51106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt 10 / 14 / 2020
Transaction ID : SA11AI.21259
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	370.00
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 80 OF 217
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Marsh, Donna, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1808 glen Ellen rd
 City Sioux City State IA Zip Code 51106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 10 / 21 / 2020
Transaction ID : SA11AI.21260
 Amount of Each Receipt this Period 20.00
 Memo Item

B. Marsh, Donna, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1808 glen Ellen rd
 City Sioux City State IA Zip Code 51106
 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 ▼ 305.00

Date of Receipt 10 / 24 / 2020
Transaction ID : SA11AI.21261
 Amount of Each Receipt this Period 20.00
 Memo Item

C. Marsh, Donna, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1808 glen Ellen rd
 City Sioux City State IA Zip Code 51106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 10 / 30 / 2020
Transaction ID : SA11AI.21262
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 60.00
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 81 OF 217
	<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. Marsh, Donna, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1808 glen Ellen rd

City Sioux City	State IA	Zip Code 51106
--------------------	-------------	-------------------

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 ▼
360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2020

Transaction ID : SA11AI.21263

Amount of Each Receipt this Period
35.00

Memo Item

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

Mailing Address 23333 Gold Rush Dr

City Diamond Bar	State CA	Zip Code 91765
---------------------	-------------	-------------------

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

Name of Employer (for Individual) Metadata	Occupation (for Individual) Computer Programmer
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2020

Transaction ID : SA11AI.21273

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 23333 Gold Rush Dr

City Diamond Bar	State CA	Zip Code 91765
---------------------	-------------	-------------------

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

Name of Employer (for Individual) Metadata	Occupation (for Individual) Computer Programmer
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	22	/	2020

Transaction ID : SA11AI.21274

Amount of Each Receipt this Period
200.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	485.00
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 82 OF 217
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Mashian, Cornelia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 236 Sunset Ave
 City Santa Cruz CA State CA Zip Code 95060
 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 **1000.00**

Date of Receipt **11 / 07 / 2020**
Transaction ID : SA11AI.21277
 Amount of Each Receipt this Period **500.00**
 Memo Item

B. McCarthy, Susan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 218 Howth St
 City San Francisco CA State CA Zip Code 94112-2416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) author
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **213.00**

Date of Receipt **10 / 20 / 2020**
Transaction ID : SA11AI.21304
 Amount of Each Receipt this Period **24.00**
 Memo Item

C. McCarthy, Susan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 218 Howth St
 City San Francisco CA State CA Zip Code 94112-2416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) author
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **232.00**

Date of Receipt **11 / 02 / 2020**
Transaction ID : SA11AI.21308
 Amount of Each Receipt this Period **19.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	543.00
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 83 OF 217
	<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. McCarthy, Susan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 218 Howth St
 City San Francisco State CA Zip Code 94112-2416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) author
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 256.00

Date of Receipt 11 / 05 / 2020
Transaction ID : SA11AI.21309
 Amount of Each Receipt this Period 24.00
 Memo Item

B. McCarthy, Susan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 218 Howth St
 City San Francisco State CA Zip Code 94112-2416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) author
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 277.00

Date of Receipt 11 / 07 / 2020
Transaction ID : SA11AI.21310
 Amount of Each Receipt this Period 21.00
 Memo Item

C. McKinzie, Matthew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5838 Burke Manor Ct
 City Burke State VA Zip Code 22015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) National Retail Federation Occupation (for Individual) Web Developer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 03 / 2020
Transaction ID : SA11AI.21330
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	95.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 217
	<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 ▼ 487.00

Date of Receipt 10 / 17 / 2020
Transaction ID : SA11AI.21344
 Amount of Each Receipt this Period 51.00
 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 ▼ 538.00

Date of Receipt 10 / 23 / 2020
Transaction ID : SA11AI.21345
 Amount of Each Receipt this Period 51.00
 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 ▼ 563.00

Date of Receipt 11 / 01 / 2020
Transaction ID : SA11AI.21346
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	127.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 217
	<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 ▼
588.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2020

Transaction ID : SA11AI.21347

Amount of Each Receipt this Period
25.00

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 ▼
688.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		18		2020

Transaction ID : SA11AI.21348

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 11039 Miners Place

City Nevada City	State CA	Zip Code 95959
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) none	Occupation (for Individual) none
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2020

Transaction ID : SA11AI.21377

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 86 OF 217
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Milroy, Marjorie, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11039 Miners Place

City Nevada City	State CA	Zip Code 95959
---------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	10	/	2020

Transaction ID : SA11AI.21378

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 8035 W Mercer Way

City Mercer Island	State WA	Zip Code 98040
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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 ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2020

Transaction ID : SA11AI.21381

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 8035 W Mercer Way

City Mercer Island	State WA	Zip Code 98040
-----------------------	-------------	-------------------

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

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2020

Transaction ID : SA11AI.21382

Amount of Each Receipt this Period
100.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 87 OF 217
<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. Moore, Ronald, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2600 San Leandro Blvd Apt 1605

City San Leandro	State CA	Zip Code 94578
---------------------	-------------	-------------------

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

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	14	/	2020

Transaction ID : SA11AI.21408

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 2600 San Leandro Blvd Apt 1605

City San Leandro	State CA	Zip Code 94578
---------------------	-------------	-------------------

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 ▼
335.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2020

Transaction ID : SA11AI.21409

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 3651 Avocet Ct

City Merced	State CA	Zip Code 95340
----------------	-------------	-------------------

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

Name of Employer (for Individual) UC	Occupation (for Individual) Professor
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2020

Transaction ID : SA11AI.21413

Amount of Each Receipt this Period
50.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 217
	<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. Moran, Emily, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3651 Avocet Ct
 City Merced State CA Zip Code 95340
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UC Occupation (for Individual) Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 11 / 09 / 2020
Transaction ID : SA11AI.21414
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Moreillon, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 661 W Calle Torres Blancas #5105
 City Green Valley State AZ Zip Code 85614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) none Occupation (for Individual) none
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 10 / 05 / 2020
Transaction ID : SA11AI.21415
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Moreillon, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 661 W Calle Torres Blancas #5105
 City Green Valley State AZ Zip Code 85614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) none Occupation (for Individual) none
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt 10 / 14 / 2020
Transaction ID : SA11AI.21416
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	135.00
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 89 OF 217
	<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. Moreillon, Robert, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 661 W Calle Torres Blancas #5105

City Green Valley	State AZ	Zip Code 85614
----------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
415.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2020

Transaction ID : SA11AI.21417

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 661 W Calle Torres Blancas #5105

City Green Valley	State AZ	Zip Code 85614
----------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
435.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2020

Transaction ID : SA11AI.21418

Amount of Each Receipt this Period
20.00

Memo Item

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

Mailing Address 661 W Calle Torres Blancas #5105

City Green Valley	State AZ	Zip Code 85614
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
470.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2020

Transaction ID : SA11AI.21419

Amount of Each Receipt this Period
35.00

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 90 OF 217
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Moreillon, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 661 W Calle Torres Blancas #5105
 City Green Valley State AZ Zip Code 85614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) none Occupation (for Individual) none
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 495.00

Date of Receipt 11 / 07 / 2020
Transaction ID : SA11AI.21420
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Moreillon, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 661 W Calle Torres Blancas #5105
 City Green Valley State AZ Zip Code 85614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) none Occupation (for Individual) none
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 530.00

Date of Receipt 11 / 08 / 2020
Transaction ID : SA11AI.21421
 Amount of Each Receipt this Period 35.00
 Memo Item

C. Moreillon, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 661 W Calle Torres Blancas #5105
 City Green Valley State AZ Zip Code 85614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) none Occupation (for Individual) none
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 580.00

Date of Receipt 11 / 18 / 2020
Transaction ID : SA11AI.21422
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 110.00
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 91 OF 217
	<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. Moreillon, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 661 W Calle Torres Blancas #5105

City Green Valley	State AZ	Zip Code 85614
----------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 23 / 2020
Transaction ID : SA11AI.21423

Amount of Each Receipt this Period
20.00

Memo Item

B. Moy, Kirsten S, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 197 Georgia Way

City San Leandro	State CA	Zip Code 94577
---------------------	-------------	-------------------

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 ▼
675.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 11 / 2020
Transaction ID : SA11AI.21437

Amount of Each Receipt this Period
75.00

Memo Item

C. Moy, Kirsten S, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 197 Georgia Way

City San Leandro	State CA	Zip Code 94577
---------------------	-------------	-------------------

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 ▼
775.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 14 / 2020
Transaction ID : SA11AI.21435

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	195.00
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 92 OF 217
	<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. Moy, Kirsten S, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 197 Georgia Way
 City San Leandro State CA Zip Code 94577
 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 ▼ 825.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2020
Transaction ID : SA11AI.21438
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. Moy, Kirsten S, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 197 Georgia Way
 City San Leandro State CA Zip Code 94577
 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 ▼ 875.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2020
Transaction ID : SA11AI.21436
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. Moy, Kirsten S, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 197 Georgia Way
 City San Leandro State CA Zip Code 94577
 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 ▼ 950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 11 / 2020
Transaction ID : SA11AI.21439
 Amount of Each Receipt this Period
 75.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	175.00
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 93 OF 217
	(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. Murdock, Gina, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Po Box 2272
 City Aspen State CO Zip Code 81612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Teacher
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2020
Transaction ID : SA11AI.21456
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. Murdock, Gina, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Po Box 2272
 City Aspen State CO Zip Code 81612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Teacher
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2020
Transaction ID : SA11AI.21457
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. Murdock, Gina, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Po Box 2272
 City Aspen State CO Zip Code 81612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Teacher
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 19 / 2020
Transaction ID : SA11AI.21458
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
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 94 OF 217
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Murphy, Liz, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4811 Avenue F
 City Austin State TX Zip Code 78751
 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 ▼ 1000.00

Date of Receipt 11 / 03 / 2020
Transaction ID : SA11AI.21466
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. nelson, carol, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 427 MILLER CREEK RD.
 City San Rafael State CA Zip Code 94903
 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 ▼ 215.00

Date of Receipt 11 / 03 / 2020
Transaction ID : SA11AI.21486
 Amount of Each Receipt this Period 50.00
 Memo Item

C. nelson, carol, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 427 MILLER CREEK RD.
 City San Rafael State CA Zip Code 94903
 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 ▼ 255.00

Date of Receipt 11 / 05 / 2020
Transaction ID : SA11AI.21487
 Amount of Each Receipt this Period 40.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1090.00
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 95 OF 217
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
nelson, carol, , ,

Mailing Address 427 MILLER CREEK RD.

City San Rafael	State CA	Zip Code 94903
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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 ▼
305.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	17	/	2020

Transaction ID : SA11AI.21488

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 427 MILLER CREEK RD.

City San Rafael	State CA	Zip Code 94903
--------------------	-------------	-------------------

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 ▼
345.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2020

Transaction ID : SA11AI.21489

Amount of Each Receipt this Period
40.00

Memo Item

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

Mailing Address 4205 Ridgmont Drive

City Everett	State WA	Zip Code 98203
-----------------	-------------	-------------------

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 ▼
345.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2020

Transaction ID : SA11AI.21514

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	190.00
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 96 OF 217
	<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. Nixon, Lynn, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4205 Ridgmont Drive
 City Everett State WA Zip Code 98203
 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 ▼ 445.00

Date of Receipt 11 / 14 / 2020
Transaction ID : SA11AI.21515
 Amount of Each Receipt this Period 100.00
 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 ▼ 1525.00

Date of Receipt 10 / 11 / 2020
Transaction ID : SA11AI.21539
 Amount of Each Receipt this Period 25.00
 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 ▼ 1625.00

Date of Receipt 10 / 31 / 2020
Transaction ID : SA11AI.21540
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 217
	<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. 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 ▼ 1725.00

Date of Receipt
 11 / 07 / 2020
Transaction ID : SA11AI.21541
 Amount of Each Receipt this Period
 100.00
 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 ▼ 1750.00

Date of Receipt
 11 / 11 / 2020
Transaction ID : SA11AI.21542
 Amount of Each Receipt this Period
 25.00
 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 ▼ 1850.00

Date of Receipt
 11 / 17 / 2020
Transaction ID : SA11AI.21543
 Amount of Each Receipt this Period
 100.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 98 OF 217
	(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. Oesterling, Sally, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9700 Cottrell Terrace
 City Silver Spring State MD Zip Code 20903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 06 / 2020
Transaction ID : SA11AI.21544
 Amount of Each Receipt this Period
 17.50
 Memo Item

B. Oleyer, George & Sue, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 34 Studley Rd
 City Bass River State MA Zip Code 02664
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2020
Transaction ID : SA11AI.21554
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. Overs, Mark P., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21414 Silver Spring Dr.
 City Menomonee Falls State WI Zip Code 53061
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Artist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 805.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 14 / 2020
Transaction ID : SA11AI.21572
 Amount of Each Receipt this Period
 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	137.50
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 99 OF 217
	<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. Overs, Mark P., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21414 Silver Spring Dr.
 City Menomonee Falls State WI Zip Code 53061
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Artist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1005.00

Date of Receipt 11 / 23 / 2020
Transaction ID : SA11AI.22604
 Amount of Each Receipt this Period 200.00
 Memo Item

B. Parr, Carol, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 Bay Tree Lane
 City Mill Valley State CA Zip Code 94941
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 13 / 2020
Transaction ID : SA11AI.21592
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Parr, Carol, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 Bay Tree Lane
 City Mill Valley State CA Zip Code 94941
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 11 / 23 / 2020
Transaction ID : SA11AI.21593
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	275.00
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 100 OF 217
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Perkins, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 61 topaz way
 City sequim State WA Zip Code 98382
 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 ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 22 / 2020
Transaction ID : SA11AI.21618
 Amount of Each Receipt this Period
 1000.00
 Memo Item

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

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2020
Transaction ID : SA11AI.21621
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. Peterson, Linda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6541 2nd Ave NW
 City Seattle State WA Zip Code 98117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2020
Transaction ID : SA11AI.21633
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1275.00
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 101 OF 217
	<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. Pollack, Chaya, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1011 Pine Ridge Road

City Richmond	State VA	Zip Code 23226
------------------	-------------	-------------------

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 ▼
672.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2020

Transaction ID : SA11AI.21658

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 1011 Pine Ridge Road

City Richmond	State VA	Zip Code 23226
------------------	-------------	-------------------

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 ▼
772.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2020

Transaction ID : SA11AI.21659

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 1011 Pine Ridge Road

City Richmond	State VA	Zip Code 23226
------------------	-------------	-------------------

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 ▼
872.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2020

Transaction ID : SA11AI.21660

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
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 102 OF 217
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Pollack, Chaya, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1011 Pine Ridge Road

City Richmond	State VA	Zip Code 23226
------------------	-------------	-------------------

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 ▼
972.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2020

Transaction ID : SA11AI.21661

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 1011 Pine Ridge Road

City Richmond	State VA	Zip Code 23226
------------------	-------------	-------------------

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 ▼
1072.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	22	/	2020

Transaction ID : SA11AI.21662

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 917 Jefferson Ave

City Farmington	State NM	Zip Code 87401
--------------------	-------------	-------------------

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

Name of Employer (for Individual) Private	Occupation (for Individual) Pediatrician
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2020

Transaction ID : SA11AI.21705

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
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 103 OF 217
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Reisel, Karl, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1563 Riverdale Dr.
 City Oconomowoc State WI Zip Code 53066
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 07 / 2020
Transaction ID : SA11AI.21722
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Reisel, Karl, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1563 Riverdale Dr.
 City Oconomowoc State WI Zip Code 53066
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 21 / 2020
Transaction ID : SA11AI.21723
 Amount of Each Receipt this Period 200.00
 Memo Item

C. Reisel, Karl, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1563 Riverdale Dr.
 City Oconomowoc State WI Zip Code 53066
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 11 / 05 / 2020
Transaction ID : SA11AI.21724
 Amount of Each Receipt this Period 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	425.00
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 104 OF 217
<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. Richardson, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 52 Balls Hill Road
 City Concord State MA Zip Code 01742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The Cuvee Fund Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 20 / 2020
Transaction ID : SA11AI.21740
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Richardson, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 52 Balls Hill Road
 City Concord State MA Zip Code 01742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The Cuvee Fund Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 18 / 2020
Transaction ID : SA11AI.21741
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Richardson, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 52 Balls Hill Road
 City Concord State MA Zip Code 01742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The Cuvee Fund Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 22 / 2020
Transaction ID : SA11AI.21742
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
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 105 OF 217
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Rigsby, David, , ,			Date of Receipt
Mailing Address PO Box 44			<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2020"/>
City Embudo	State NM	Zip Code 87531	Transaction ID : SA11AI.22577
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="1000.00"/>
Name of Employer (for Individual) Embudo Valley Organics		Occupation (for Individual) Owner	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="3500.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Roberts, Linda, , ,			Date of Receipt
Mailing Address 11731 87th St			<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2020"/>
City Burr Ridge	State IL	Zip Code 60527-6403	Transaction ID : SA11AI.21767
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="70.00"/>
Name of Employer (for Individual) Not Employed		Occupation (for Individual) Not Employed	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="225.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Roberts, Robert, , ,			Date of Receipt
Mailing Address 243 Bryant			<input type="text" value="11"/> / <input type="text" value="22"/> / <input type="text" value="2020"/>
City Glen Ellyn	State IL	Zip Code 60137	Transaction ID : SA11AI.21768
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="60.00"/>
Name of Employer (for Individual) Not employed		Occupation (for Individual) Not employed	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="280.00"/>		

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="1130.00"/>
TOTAL 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 106 OF 217
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Rose, Briana, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 75 Old Clove Road
 City High Falls State NY Zip Code 12440
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 21 / 2020
Transaction ID : SA11AI.21796
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Rosow, Lois, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 760 Lauraland Dr S
 City Columbus State OH Zip Code 43214
 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 11 / 01 / 2020
Transaction ID : SA11AI.21808
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Sample, Greg, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 Botany Place
 City Brunswick State ME Zip Code 04011
 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 ▼ 395.00

Date of Receipt 11 / 07 / 2020
Transaction ID : SA11AI.21864
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
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 107 OF 217
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Sample, Greg, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10 Botany Place

City Brunswick	State ME	Zip Code 04011
-------------------	-------------	-------------------

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 ▼
445.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	18	/	2020

Transaction ID : SA11AI.21865

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 10 Botany Place

City Brunswick	State ME	Zip Code 04011
-------------------	-------------	-------------------

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 ▼
470.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2020

Transaction ID : SA11AI.21866

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 208 23rd Ave.

City San Mateo	State CA	Zip Code 94403
-------------------	-------------	-------------------

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

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	07	/	2020

Transaction ID : SA11AI.21880

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	100.00
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 108 OF 217
	<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. Santos, Dave, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 23rd Ave.
 City San Mateo State CA Zip Code 94403
 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 ▼ 295.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 13 / 2020
Transaction ID : SA11AI.21881
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Santos, Dave, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 23rd Ave.
 City San Mateo State CA Zip Code 94403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2020
Transaction ID : SA11AI.21882
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Santos, Dave, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 23rd Ave.
 City San Mateo State CA Zip Code 94403
 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 ▼ 345.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2020
Transaction ID : SA11AI.21883
 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 109 OF 217
	<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. Santos, Dave, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 23rd Ave.
 City San Mateo State CA Zip Code 94403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2020
Transaction ID : SA11AI.21884
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. Santos, Dave, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 23rd Ave.
 City San Mateo State CA Zip Code 94403
 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 ▼ 395.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2020
Transaction ID : SA11AI.21885
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. Santos, Dave, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 23rd Ave.
 City San Mateo State CA Zip Code 94403
 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 ▼ 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2020
Transaction ID : SA11AI.21886
 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 110 OF 217
	<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. Santos, Dave, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 23rd Ave.
 City San Mateo State CA Zip Code 94403
 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 ▼ 445.00

Date of Receipt **11 / 08 / 2020**
Transaction ID : SA11AI.21887
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Santos, Dave, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 23rd Ave.
 City San Mateo State CA Zip Code 94403
 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 ▼ 470.00

Date of Receipt **11 / 13 / 2020**
Transaction ID : SA11AI.21888
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Santos, Dave, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 23rd Ave.
 City San Mateo State CA Zip Code 94403
 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 ▼ 495.00

Date of Receipt **11 / 19 / 2020**
Transaction ID : SA11AI.21889
 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 111 OF 217
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
sarkisian, corey, , ,

Mailing Address po box 1541

City Vashon	State WA	Zip Code 98070
----------------	-------------	-------------------

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

Name of Employer (for Individual) Not employed	Occupation (for Individual) Not employed
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

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

Transaction ID : SA11AI.21892

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address po box 1541

City Vashon	State WA	Zip Code 98070
----------------	-------------	-------------------

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 ▼
255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	08	/	2020

Transaction ID : SA11AI.21893

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address po box 1541

City Vashon	State WA	Zip Code 98070
----------------	-------------	-------------------

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

Name of Employer (for Individual) Not employed	Occupation (for Individual) Not employed
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
285.00

Date of Receipt

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

Transaction ID : SA11AI.21894

Amount of Each Receipt this Period
30.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 112 OF 217
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
sarkisian, corey, , ,

Mailing Address po box 1541

City Vashon	State WA	Zip Code 98070
----------------	-------------	-------------------

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 ▼
315.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		18		2020

Transaction ID : SA11AI.21895

Amount of Each Receipt this Period
30.00

Memo Item

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

Mailing Address po box 1541

City Vashon	State WA	Zip Code 98070
----------------	-------------	-------------------

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 ▼
345.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		21		2020

Transaction ID : SA11AI.21896

Amount of Each Receipt this Period
30.00

Memo Item

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

Mailing Address 6740 Germanton Road

City Germanton	State NC	Zip Code 27019
-------------------	-------------	-------------------

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

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		17		2020

Transaction ID : SA11AI.21917

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	560.00
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 113 OF 217
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Scherl, Marvin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6740 Germanton Road
 City Germanton State NC Zip Code 27019
 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 ▼ 1000.00

Date of Receipt **11 / 22 / 2020**
Transaction ID : SA11AI.21918
 Amount of Each Receipt this Period 500.00
 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 ▼ 255.00

Date of Receipt **10 / 14 / 2020**
Transaction ID : SA11AI.21922
 Amount of Each Receipt this Period 45.00
 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 ▼ 280.00

Date of Receipt **11 / 14 / 2020**
Transaction ID : SA11AI.21923
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	570.00
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 114 OF 217
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Seitz, Patricia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9226 Westfork Trl
 City Fort Worth State TX Zip Code 76179
 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 10 / 10 / 2020
Transaction ID : SA11AI.21962
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Selby, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 211 S Chippewa pl
 City Chandler State AZ Zip Code 85224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Arizona State University Occupation (for Individual) Lecturer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 10 / 13 / 2020
Transaction ID : SA11AI.21963
 Amount of Each Receipt this Period 30.00
 Memo Item

C. Selby, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 211 S Chippewa pl
 City Chandler State AZ Zip Code 85224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Arizona State University Occupation (for Individual) Lecturer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 11 / 13 / 2020
Transaction ID : SA11AI.21964
 Amount of Each Receipt this Period 30.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	85.00
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 115 OF 217
	<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. Severtson, Laurence, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 646
 City Olympia State WA Zip Code 98507-0646
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) none Occupation (for Individual) none
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2020
Transaction ID : SA11AI.21972
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. Severtson, Laurence, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 646
 City Olympia State WA Zip Code 98507-0646
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) none Occupation (for Individual) none
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 18 / 2020
Transaction ID : SA11AI.21973
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. Shields, Deborah, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 501 13th Avenue West
 City Kirkland State WA Zip Code 98033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not employed Occupation (for Individual) Not employed
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2020
Transaction ID : SA11AI.21997
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	100.00
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 116 OF 217
<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. Sinclair, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2922 Tilden Ave
 City Los Angeles State CA Zip Code 90064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 06 / 2020
Transaction ID : SA11AI.22023
 Amount of Each Receipt this Period 20.00
 Memo Item

B. Sinclair, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2922 Tilden Ave
 City Los Angeles State CA Zip Code 90064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 10 / 28 / 2020
Transaction ID : SA11AI.22024
 Amount of Each Receipt this Period 20.00
 Memo Item

C. Sinclair, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2922 Tilden Ave
 City Los Angeles State CA Zip Code 90064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 10 / 30 / 2020
Transaction ID : SA11AI.22025
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	60.00
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 117 OF 217 (check only one)
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Sinclair, Scott, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 333 Ellen Drive

City San Rafael	State CA	Zip Code 94903
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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 ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2020
Transaction ID : SA11AI.22026

Amount of Each Receipt this Period
25.00

Memo Item

B. Sinclair, Scott, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 333 Ellen Drive

City San Rafael	State CA	Zip Code 94903
--------------------	-------------	-------------------

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

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 13 / 2020
Transaction ID : SA11AI.22027

Amount of Each Receipt this Period
25.00

Memo Item

C. Sinclair, Scott, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 333 Ellen Drive

City San Rafael	State CA	Zip Code 94903
--------------------	-------------	-------------------

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

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2020
Transaction ID : SA11AI.22028

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 118 OF 217
	<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. Sinclair, Scott, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 333 Ellen Drive
 City San Rafael State CA Zip Code 94903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 11 / 01 / 2020
Transaction ID : SA11AI.22029
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Sinclair, Scott, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 333 Ellen Drive
 City San Rafael State CA Zip Code 94903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 11 / 17 / 2020
Transaction ID : SA11AI.22030
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Sinclair, Scott, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 333 Ellen Drive
 City San Rafael State CA Zip Code 94903
 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 ▼ 375.00

Date of Receipt
 11 / 21 / 2020
Transaction ID : SA11AI.22031
 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 119 OF 217
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Smudz, Susan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4655 Haymarket Ct
 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 ▼ 932.00

Date of Receipt
 11 / 05 / 2020
Transaction ID : SA11AI.22058
 Amount of Each Receipt this Period 132.00
 Memo Item

B. Smudz, Susan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4655 Haymarket Ct
 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 ▼ 1064.00

Date of Receipt
 11 / 17 / 2020
Transaction ID : SA11AI.22059
 Amount of Each Receipt this Period 132.00
 Memo Item

C. Spangler, Susanne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2602 Bernwood St
 City Duarte State CA Zip Code 91010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 11 / 19 / 2020
Transaction ID : SA11AI.22076
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	314.00
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 120 OF 217
	<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. Stanley, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 66 lake Road
 City Dublin State NH Zip Code 03444
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 11 / 21 / 2020
Transaction ID : SA11AI.22097
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Steck, Pat, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1308 Old Stickney Point Rd.
 City Sarasota State FL Zip Code 34242
 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 ▼ 400.00

Date of Receipt 10 / 17 / 2020
Transaction ID : SA11AI.22100
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Steck, Pat, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1308 Old Stickney Point Rd.
 City Sarasota State FL Zip Code 34242
 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 ▼ 450.00

Date of Receipt 10 / 30 / 2020
Transaction ID : SA11AI.22101
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	400.00
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 121 OF 217
	(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. Steck, Pat, , ,

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

Mailing Address 1308 Old Stickney Point Rd.

City Sarasota	State FL	Zip Code 34242
------------------	-------------	-------------------

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 ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2020

Transaction ID : SA11AI.22102

Amount of Each Receipt this Period
100.00

Memo Item

B. Steck, Pat, , ,

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

Mailing Address 1308 Old Stickney Point Rd.

City Sarasota	State FL	Zip Code 34242
------------------	-------------	-------------------

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 ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	22	/	2020

Transaction ID : SA11AI.22103

Amount of Each Receipt this Period
200.00

Memo Item

C. Steinhauer, Jerry, , ,

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 LLC	Occupation (for Individual) CTO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	10	/	2020

Transaction ID : SA11AI.22112

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	400.00
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 122 OF 217
	<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. Steinhauer, Jerry, , ,
 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 LLC Occupation (for Individual) CTO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 11 / 10 / 2020
Transaction ID : SA11AI.22113
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Sterling, Karla, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5101 Narragansett Ave. Apt. 206
 City San Diego State CA Zip Code 92107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 06 / 2020
Transaction ID : SA11AI.22116
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Sterling, Karla, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5101 Narragansett Ave. Apt. 206
 City San Diego State CA Zip Code 92107
 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 10 / 19 / 2020
Transaction ID : SA11AI.22117
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 123 OF 217
	<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. Sterling, Karla, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5101 Narragansett Ave. Apt. 206

City San Diego	State CA	Zip Code 92107
-------------------	-------------	-------------------

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
10	/	28	/	2020

Transaction ID : SA11AI.22118

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 5101 Narragansett Ave. Apt. 206

City San Diego	State CA	Zip Code 92107
-------------------	-------------	-------------------

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

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
625.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2020

Transaction ID : SA11AI.22119

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 5101 Narragansett Ave. Apt. 206

City San Diego	State CA	Zip Code 92107
-------------------	-------------	-------------------

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 ▼
675.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	18	/	2020

Transaction ID : SA11AI.22120

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	200.00
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 124 OF 217
<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. Sterling, Karla, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5101 Narragansett Ave. Apt. 206

City San Diego	State CA	Zip Code 92107
-------------------	-------------	-------------------

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

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
 11 / 19 / 2020
Transaction ID : SA11AI.22121

Amount of Each Receipt this Period
25.00

Memo Item

B. Sterling, Karla, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5101 Narragansett Ave. Apt. 206

City San Diego	State CA	Zip Code 92107
-------------------	-------------	-------------------

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

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt
 11 / 22 / 2020
Transaction ID : SA11AI.22122

Amount of Each Receipt this Period
100.00

Memo Item

C. Stewart, Sands, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2827 Ne Irving St

City Portland	State OR	Zip Code 97232
------------------	-------------	-------------------

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

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 11 / 19 / 2020
Transaction ID : SA11AI.22135

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	375.00
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 125 OF 217
	<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. Townsend, Steve, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1417 Caprock
 City hobbs State NM Zip Code 88240
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt **10 / 28 / 2020**
Transaction ID : SA11AI.22256
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Townsend, Steve, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1417 Caprock
 City hobbs State NM Zip Code 88240
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt **11 / 10 / 2020**
Transaction ID : SA11AI.22257
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Townsend, Steve, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1417 Caprock
 City hobbs State NM Zip Code 88240
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt **11 / 23 / 2020**
Transaction ID : SA11AI.22258
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	400.00
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 126 OF 217
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Verderber, Elsa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1635 Roseland Ave
 City E. Lansing State MI Zip Code 48823-4751
 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 ▼ 390.00

Date of Receipt 10 / 01 / 2020
Transaction ID : SA11AI.22286
 Amount of Each Receipt this Period 30.00
 Memo Item

B. Verderber, Elsa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1635 Roseland Ave
 City E. Lansing State MI Zip Code 48823-4751
 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 ▼ 430.00

Date of Receipt 10 / 17 / 2020
Transaction ID : SA11AI.22287
 Amount of Each Receipt this Period 40.00
 Memo Item

C. Vickers, Earl, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1828 Harding St.
 City Seaside State CA Zip Code 93955
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 10 / 01 / 2020
Transaction ID : SA11AI.22290
 Amount of Each Receipt this Period 25.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 127 OF 217
	<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. Vickers, Earl, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1828 Harding St.

City Seaside	State CA	Zip Code 93955
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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 ▼
345.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2020

Transaction ID : SA11AI.22291

Amount of Each Receipt this Period
20.00

Memo Item

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

Mailing Address 1828 Harding St.

City Seaside	State CA	Zip Code 93955
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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 ▼
370.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2020

Transaction ID : SA11AI.22292

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 343 Valley Oaks Drive

City Santa Rosa	State CA	Zip Code 95409
--------------------	-------------	-------------------

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

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2020

Transaction ID : SA11AI.22344

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	70.00
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 128 OF 217
	<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. Weicker, Dorothy, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 343 Valley Oaks Drive

City Santa Rosa	State CA	Zip Code 95409
--------------------	-------------	-------------------

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 ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	12	/	2020

Transaction ID : SA11AI.22345

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 343 Valley Oaks Drive

City Santa Rosa	State CA	Zip Code 95409
--------------------	-------------	-------------------

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

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2020

Transaction ID : SA11AI.22346

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 343 Valley Oaks Drive

City Santa Rosa	State CA	Zip Code 95409
--------------------	-------------	-------------------

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

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	12	/	2020

Transaction ID : SA11AI.22347

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 129 OF 217
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
williams, leslie, , ,

Mailing Address 376 Harris Road

City Bedford Hills	State NY	Zip Code 10507
-----------------------	-------------	-------------------

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

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

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
10		18		2020

Transaction ID : SA11AI.22393

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 376 Harris Road

City Bedford Hills	State NY	Zip Code 10507
-----------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2020

Transaction ID : SA11AI.22394

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 10 Holmdel New Jersey

City Holmdel	State NJ	Zip Code 07733
-----------------	-------------	-------------------

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

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2020

Transaction ID : SA11AI.22409

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1600.00
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 130 OF 217
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Wilson, Elizabeth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 Holmdel New Jersey
 City Holmdel State NJ Zip Code 07733
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 11 / 2020
Transaction ID : SA11AI.22410
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. Wolanin, Peter, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1620 E Berks St
 City PHILADELPHIA State PA Zip Code 19125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BioRAFT Occupation (for Individual) software engineer
 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
 11 / 17 / 2020
Transaction ID : SA11AI.22419
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. Yaffe, Steven, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2798 Woodridge Dr
 City Fort Mill State SC Zip Code 29715
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Yaffe mobility consulting Occupation (for Individual) Consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 12 / 2020
Transaction ID : SA11AI.22440
 Amount of Each Receipt this Period
 25.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 131 OF 217
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Yaffe, Steven, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2798 Woodridge Dr

City Fort Mill	State SC	Zip Code 29715
-------------------	-------------	-------------------

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

Name of Employer (for Individual) Yaffe mobility consulting	Occupation (for Individual) Consultant
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	12	/	2020

Transaction ID : SA11AI.22441

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 2798 Woodridge Dr

City Fort Mill	State SC	Zip Code 29715
-------------------	-------------	-------------------

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

Name of Employer (for Individual) Yaffe mobility consulting	Occupation (for Individual) Consultant
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
370.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	17	/	2020

Transaction ID : SA11AI.22442

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 1412 S Adams Ave Apt 314

City Marshfield	State WI	Zip Code 54449
--------------------	-------------	-------------------

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

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
240.25

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	05	/	2020

Transaction ID : SA11AI.22455

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	100.00
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 132 OF 217
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

Mailing Address 1412 S Adams Ave Apt 314

City Marshfield	State WI	Zip Code 54449
--------------------	-------------	-------------------

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 ▼
275.92

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2020

Transaction ID : SA11AI.22456

Amount of Each Receipt this Period
35.67

Memo Item

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

Mailing Address 1412 S Adams Ave Apt 314

City Marshfield	State WI	Zip Code 54449
--------------------	-------------	-------------------

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

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.92

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2020

Transaction ID : SA11AI.22457

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

SUBTOTAL of Receipts This Page (optional).....	60.67
TOTAL This Period (last page this line number only).....	42850.17

**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 133 OF 217
<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. Gandhi, Janani, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 924 Sylvan Ave
 City Ann Arbor State MI Zip Code 48104
 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 ▼
 800.00

Date of Receipt
 11 / 16 / 2020
Transaction ID : SA15.22579
 Amount of Each Receipt this Period
 600.00
 Memo Item

B. Hardee, Heather, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 745 Cherry Street
 City Winnetka State IL Zip Code 60093
 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 ▼
 300.00

Date of Receipt
 11 / 12 / 2020
Transaction ID : SA15.22582
 Amount of Each Receipt this Period
 300.00
 Memo Item

C. Shenkman, Mia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2814 N Van. Buren St
 City Arlington State VA Zip Code 22213
 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 ▼
 300.00

Date of Receipt
 11 / 12 / 2020
Transaction ID : SA15.22581
 Amount of Each Receipt this Period
 300.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	1200.00

**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 134 OF 217
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Lingam, Sashi, , ,

Mailing Address 4615 Center Blvd 310

City Long Island City	State NY	Zip Code 11109
--------------------------	-------------	-------------------

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 ▼
5570.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		18		2020

Transaction ID : SA17.22466

Amount of Each Receipt this Period
1840.00

Memo Item
Contribution - IE Only Account

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

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1840.00
TOTAL This Period (last page this line number only).....	1840.00

**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) A. Aaronson, Marissa, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2020	
Mailing Address 704 E Dorchester		FEC Identification Number C [] Transaction ID : SB21B.22605 Amount of Each Disbursement this Period [] 200.00	
City Saint Johns	State FL	Zip Code 32259	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. Aaronson, Marissa, , ,		Date of Disbursement MM / DD / YYYY 10 / 28 / 2020	
Mailing Address 704 E Dorchester		FEC Identification Number C [] Transaction ID : SB21B.22606 Amount of Each Disbursement this Period [] 200.00	
City Saint Johns	State FL	Zip Code 32259	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) C. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 11 / 23 / 2020	
Mailing Address PO Box 441146		FEC Identification Number C [] Transaction ID : SB21B.22467 Amount of Each Disbursement this Period [] 4887.52	
City Somerville	State MA	Zip Code 02144	Category/ Type []
Purpose of Disbursement Credit Card Processing Fees		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 5287.52
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 Network

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
11 / 09 / 2020

FEC Identification Number

C
Transaction ID : SB21B.22534
Amount of Each Disbursement this Period
2004.04

Memo Item

Full Name (Last, First, Middle Initial)

B. Action Squared LLC

Mailing Address 1900 L Street, NW Suite 900

City Washington State DC Zip Code 20036

Purpose of Disbursement Database Management

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 08 / 2020

FEC Identification Number

C
Transaction ID : SB21B.22491
Amount of Each Disbursement this Period
2087.25

Memo Item

Full Name (Last, First, Middle Initial)

C. Alfano, Eleanor, , ,

Mailing Address 1440 Lincoln Ave

City Saint Paul State MN Zip Code 55105

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 15 / 2020

FEC Identification Number

C
Transaction ID : SB21B.22607
Amount of Each Disbursement this Period
250.00

Memo Item

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

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

4341.29

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

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

FOR LINE NUMBER:
(check only one)

<input 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. Alfano, Eleanor, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1440 Lincoln Ave

City Saint Paul State MN Zip Code 55105

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 28 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22608

Amount of Each Disbursement this Period: 250.00

Memo Item

B. Amalgamated Bank

Full Name (Last, First, Middle Initial)

Mailing Address 1825 K Street, N.W

City Washington State DC Zip Code 20006

Purpose of Disbursement Bank Charges

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 29 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22525

Amount of Each Disbursement this Period: 15.04

Memo Item

C. Anderson, Holly, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 6425 W Clarke St.

City Wauwatosa State WI Zip Code 53213

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 16 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22494

Amount of Each Disbursement this Period: 180.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 445.04

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Anderson, Holly, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 6425 W Clarke St.

City Wauwatosa State WI Zip Code 53213

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 18 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22544

Amount of Each Disbursement this Period: 240.00

Memo Item

B. Aridou, Thamara L, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2920 Wyman Parkway

City Baltimore State MD Zip Code 21211

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 15 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22609

Amount of Each Disbursement this Period: 200.00

Memo Item

C. Balijepalli, Nikhitha, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 23507 Sugar View Drive

City Clarksburg State MD Zip Code 20871

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 15 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22611

Amount of Each Disbursement this Period: 200.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 640.00

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. Balijepalli, Nikhitha, , ,

Mailing Address 23507 Sugar View Drive

City
Clarksburg

State
MD

Zip Code
20871

Purpose of Disbursement
Strategic Consulting

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			28			2020			

FEC Identification Number

C

Transaction ID : SB21B.22611

Amount of Each Disbursement this Period

200.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Bauman, Alexandra, , ,

Mailing Address 65 Edgewood Ave
#2

City
New Haven

State
CT

Zip Code
06511

Purpose of Disbursement
Strategic Consulting

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			15			2020			

FEC Identification Number

C

Transaction ID : SB21B.22612

Amount of Each Disbursement this Period

200.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Bauman, Alexandra, , ,

Mailing Address 65 Edgewood Ave
#2

City
New Haven

State
CT

Zip Code
06511

Purpose of Disbursement
Strategic Consulting

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			28			2020			

FEC Identification Number

C

Transaction ID : SB21B.22613

Amount of Each Disbursement this Period

200.00

Memo Item

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

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

600.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial) A. Borin, Sofia I, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2020	
Mailing Address 13220 Admiral Ave UNIT G		FEC Identification Number C [] Transaction ID : SB21B.22614	
City Marina Del Rey	State CA	Zip Code 90292	Amount of Each Disbursement this Period [] 200.00
Purpose of Disbursement Strategic Consulting		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. Borin, Sofia I, , ,		Date of Disbursement MM / DD / YYYY 10 / 28 / 2020	
Mailing Address 13220 Admiral Ave UNIT G		FEC Identification Number C [] Transaction ID : SB21B.22615	
City Marina Del Rey	State CA	Zip Code 90292	Amount of Each Disbursement this Period [] 200.00
Purpose of Disbursement Strategic Consulting		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) C. Bradbury, Maya, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2020	
Mailing Address 58 Webster Rd		FEC Identification Number C [] Transaction ID : SB21B.22616	
City Freeport	State ME	Zip Code 04032	Amount of Each Disbursement this Period [] 200.00
Purpose of Disbursement Strategic Consulting		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:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 600.00
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Bradbury, Maya, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 58 Webster Rd

City Freeport State ME Zip Code 04032

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 28 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22617

Amount of Each Disbursement this Period: 200.00

Memo Item

B. Brennan, Claire, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3027 S. Jasmine St.

City Denver State CO Zip Code 80222

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 15 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22618

Amount of Each Disbursement this Period: 200.00

Memo Item

C. Brennan, Claire, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3027 S. Jasmine St.

City Denver State CO Zip Code 80222

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 28 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22619

Amount of Each Disbursement this Period: 200.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 600.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial) A. Brownfield, Alex, , ,		Date of Disbursement MM / DD / YYYY 11 / 18 / 2020	
Mailing Address 132 Iron Run Road		FEC Identification Number C [] Transaction ID : SB21B.22554 Amount of Each Disbursement this Period [] 240.00	
City Bethel Park	State PA	Zip Code 15102	Category/ Type []
Purpose of Disbursement Strategic Consulting			
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. Buder-Greenwood, Anika, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2020	
Mailing Address 1319 Prospect Ave		FEC Identification Number C [] Transaction ID : SB21B.22620 Amount of Each Disbursement this Period [] 250.00	
City Brooklyn	State NY	Zip Code 11218	Category/ Type []
Purpose of Disbursement Strategic Consulting			
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) C. Buder-Greenwood, Anika, , ,		Date of Disbursement MM / DD / YYYY 10 / 28 / 2020	
Mailing Address 1319 Prospect Ave		FEC Identification Number C [] Transaction ID : SB21B.22621 Amount of Each Disbursement this Period [] 250.00	
City Brooklyn	State NY	Zip Code 11218	Category/ Type []
Purpose of Disbursement Strategic Consulting			
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:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 740.00
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. Buder-Greenwood, Anika, , ,		Date of Disbursement MM / DD / YYYY 11 / 12 / 2020	
Mailing Address 1319 Prospect Ave		FEC Identification Number C [] Transaction ID : SB21B.22535 Amount of Each Disbursement this Period [] 200.00	
City Brooklyn	State NY	Zip Code 11218	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. Buder-Greenwood, Anika, , ,		Date of Disbursement MM / DD / YYYY 11 / 20 / 2020	
Mailing Address 1319 Prospect Ave		FEC Identification Number C [] Transaction ID : SB21B.22622 Amount of Each Disbursement this Period [] 300.00	
City Brooklyn	State NY	Zip Code 11218	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) C. Carlson, Emma, , ,		Date of Disbursement MM / DD / YYYY 11 / 18 / 2020	
Mailing Address 4047 Sansom St		FEC Identification Number C [] Transaction ID : SB21B.22545 Amount of Each Disbursement this Period [] 240.00	
City Philadelphia	State PA	Zip Code 19104	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:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 740.00
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. Chambers, Phoebe H, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2020	
Mailing Address 11409 Ridge Mist Terrace		FEC Identification Number C [] Transaction ID : SB21B.22623 Amount of Each Disbursement this Period [] 200.00	
City Potomac	State MD	Zip Code 20854	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. Chambers, Phoebe H, , ,		Date of Disbursement MM / DD / YYYY 10 / 28 / 2020	
Mailing Address 11409 Ridge Mist Terrace		FEC Identification Number C [] Transaction ID : SB21B.22624 Amount of Each Disbursement this Period [] 200.00	
City Potomac	State MD	Zip Code 20854	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) C. Chen, Angela, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2020	
Mailing Address 3333 Wisconsin Avenue NW Apt 412		FEC Identification Number C [] Transaction ID : SB21B.22625 Amount of Each Disbursement this Period [] 200.00	
City Washington	State DC	Zip Code 20016	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:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 600.00
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial)

A. Chisolm, Rosalie K, , ,

Mailing Address 1818 Putter Ct
Unit C

City
Harrisonburg

State
VA

Zip Code
22801

Purpose of Disbursement
Strategic Consulting

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			15			2020			

FEC Identification Number

C

Transaction ID : SB21B.22628

Amount of Each Disbursement this Period

200.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Chisolm, Rosalie K, , ,

Mailing Address 1818 Putter Ct
Unit C

City
Harrisonburg

State
VA

Zip Code
22801

Purpose of Disbursement
Strategic Consulting

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			28			2020			

FEC Identification Number

C

Transaction ID : SB21B.22629

Amount of Each Disbursement this Period

200.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Chisolm, Rosalie K, , ,

Mailing Address 1818 Putter Ct
Unit C

City
Harrisonburg

State
VA

Zip Code
22801

Purpose of Disbursement
Strategic Consulting

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			20			2020			

FEC Identification Number

C

Transaction ID : SB21B.22627

Amount of Each Disbursement this Period

300.00

Memo Item

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

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

700.00

**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) A. Chowdhury, Zubaidah, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2020	
Mailing Address 4000 Brandywine Street NW 111		FEC Identification Number C [] Transaction ID : SB21B.22630 Amount of Each Disbursement this Period [] 200.00	
City Washington	State DC	Zip Code 20016	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. Chowdhury, Zubaidah, , ,		Date of Disbursement MM / DD / YYYY 10 / 28 / 2020	
Mailing Address 4000 Brandywine Street NW 111		FEC Identification Number C [] Transaction ID : SB21B.22631 Amount of Each Disbursement this Period [] 200.00	
City Washington	State DC	Zip Code 20016	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) C. Chowdhury, Zubaidah, , ,		Date of Disbursement MM / DD / YYYY 11 / 20 / 2020	
Mailing Address 4000 Brandywine Street NW 111		FEC Identification Number C [] Transaction ID : SB21B.22632 Amount of Each Disbursement this Period [] 300.00	
City Washington	State DC	Zip Code 20016	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:			

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

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

[] 700.00
[]

**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) A. Cooley, Mariah, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2020	
Mailing Address 1102 E Melbourne Ave		FEC Identification Number C [] Transaction ID : SB21B.22633	
City Peoria	State IL	Zip Code 61603	Amount of Each Disbursement this Period [] 200.00
Purpose of Disbursement Strategic Consulting		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. Cordova-Vizuete, Fernando, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2020	
Mailing Address 181 Hackensack Plk Rd, Apt. 2		FEC Identification Number C [] Transaction ID : SB21B.22636	
City Weehawken	State NJ	Zip Code 07086	Amount of Each Disbursement this Period [] 200.00
Purpose of Disbursement Strategic Consulting		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) C. Cordova-Vizuete, Fernando, , ,		Date of Disbursement MM / DD / YYYY 10 / 28 / 2020	
Mailing Address 181 Hackensack Plk Rd, Apt. 2		FEC Identification Number C [] Transaction ID : SB21B.22637	
City Weehawken	State NJ	Zip Code 07086	Amount of Each Disbursement this Period [] 200.00
Purpose of Disbursement Strategic Consulting		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:			

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

[] 600.00

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

[]

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial) A. Cordova-Vizuete, Fernando, , ,		Date of Disbursement MM / DD / YYYY 11 / 20 / 2020
Mailing Address 181 Hackensack Plk Rd, Apt. 2		FEC Identification Number C Transaction ID : SB21B.22635 Amount of Each Disbursement this Period 300.00
City Weehawken	State NJ	
Purpose of Disbursement Strategic Consulting	Zip Code 07086	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. Coulter, Wake, , ,		Date of Disbursement MM / DD / YYYY 10 / 07 / 2020
Mailing Address 138 Franklin St. Apt 2		FEC Identification Number C Transaction ID : SB21B.22489 Amount of Each Disbursement this Period 375.00
City Brooklyn	State NY	
Purpose of Disbursement Graphic Design	Zip Code 11222	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) C. Couture, Emilia M, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2020
Mailing Address 118 A John Street		FEC Identification Number C Transaction ID : SB21B.22638 Amount of Each Disbursement this Period 200.00
City Charlottesville	State VA	
Purpose of Disbursement Strategic Consulting	Zip Code 22903	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:		

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

875.00

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. Couture, Emilia M, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 118 A John Street

City Charlottesville State VA Zip Code 22903

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 28 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22639

Amount of Each Disbursement this Period: 200.00

Memo Item

B. Couture, Rosalie P, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 116 N Garfield St.

City Arlington State VA Zip Code 22201

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 15 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22640

Amount of Each Disbursement this Period: 200.00

Memo Item

C. Couture, Rosalie P, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 116 N Garfield St.

City Arlington State VA Zip Code 22201

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 28 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22641

Amount of Each Disbursement this Period: 200.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 600.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial) A. Cunningham, Alan, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2020	
Mailing Address 330 Ridge Rd.		FEC Identification Number C [] Transaction ID : SB21B.22642 Amount of Each Disbursement this Period [] 200.00	
City Middletown	State CT	Zip Code 06457	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. Cunningham, Alan, , ,		Date of Disbursement MM / DD / YYYY 10 / 28 / 2020	
Mailing Address 330 Ridge Rd.		FEC Identification Number C [] Transaction ID : SB21B.22643 Amount of Each Disbursement this Period [] 200.00	
City Middletown	State CT	Zip Code 06457	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) C. De-Jesus, Jasmile A, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2020	
Mailing Address 830 Bruce Street Apt. 23		FEC Identification Number C [] Transaction ID : SB21B.22644 Amount of Each Disbursement this Period [] 200.00	
City Miami Beach	State FL	Zip Code 33141	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

SUBTOTAL of Disbursements This Page (optional).....▶	[] 600.00
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial) A. De-Jesus, Jasmile A, , ,		Date of Disbursement MM / DD / YYYY 10 / 28 / 2020	
Mailing Address 830 Bruce Street Apt. 23		FEC Identification Number C [] Transaction ID : SB21B.22647	
City Miami Beach	State FL	Zip Code 33141	Amount of Each Disbursement this Period [] 200.00
Purpose of Disbursement Strategic Consulting		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. De-Jesus, Jasmile A, , ,		Date of Disbursement MM / DD / YYYY 11 / 20 / 2020	
Mailing Address 830 Bruce Street Apt. 23		FEC Identification Number C [] Transaction ID : SB21B.22645	
City Miami Beach	State FL	Zip Code 33141	Amount of Each Disbursement this Period [] 300.00
Purpose of Disbursement Strategic Consulting		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) C. Dominguez, Alejandro J, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2020	
Mailing Address 7932 S Peppertree Dr		FEC Identification Number C [] Transaction ID : SB21B.22648	
City Gilbert	State AZ	Zip Code 85298	Amount of Each Disbursement this Period [] 200.00
Purpose of Disbursement Strategic Consulting		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:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 700.00
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. Dominguez, Alejandro J, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 7932 S Peppertree Dr

City Gilbert State AZ Zip Code 85298

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 28 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22649

Amount of Each Disbursement this Period: 200.00

Memo Item

B. Dummett, Maya N, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 16 Pepperidge Road

City Morristown State NJ Zip Code 07960

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 15 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22650

Amount of Each Disbursement this Period: 200.00

Memo Item

C. Dummett, Maya N, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 16 Pepperidge Road

City Morristown State NJ Zip Code 07960

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 28 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22651

Amount of Each Disbursement this Period: 200.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 600.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Dunn, Maren, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3251 Beech St. NW

City Washington State DC Zip Code 20015

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 15 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22652

Amount of Each Disbursement this Period: 250.00

Memo Item

B. Dunn, Maren, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3251 Beech St. NW

City Washington State DC Zip Code 20015

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 28 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22653

Amount of Each Disbursement this Period: 250.00

Memo Item

C. Eisner, Matthew E, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 6715 Loring Court

City Bethesda State MD Zip Code 20817

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 15 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22654

Amount of Each Disbursement this Period: 200.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 700.00

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. Eisner, Matthew E, , ,		Date of Disbursement MM / DD / YYYY 10 / 28 / 2020	
Mailing Address 6715 Loring Court		FEC Identification Number C [] Transaction ID : SB21B.22655 Amount of Each Disbursement this Period [] 200.00	
City Bethesda	State MD	Zip Code 20817	Category/ Type <input type="checkbox"/> Memo Item
Purpose of Disbursement Strategic Consulting		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. El-Morsey, Ibrahim, , ,		Date of Disbursement MM / DD / YYYY 11 / 18 / 2020	
Mailing Address 2628 S 8th S		FEC Identification Number C [] Transaction ID : SB21B.22545 Amount of Each Disbursement this Period [] 240.00	
City Philadelphia	State PA	Zip Code 19148	Category/ Type <input type="checkbox"/> Memo Item
Purpose of Disbursement Strategic Consulting		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) C. Fashanu, Anjolaoluwa, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2020	
Mailing Address 11330c Snow Owl Pl		FEC Identification Number C [] Transaction ID : SB21B.22656 Amount of Each Disbursement this Period [] 200.00	
City Waldorf	State MD	Zip Code 20603	Category/ Type <input type="checkbox"/> Memo Item
Purpose of Disbursement Strategic Consulting		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) ▼	
SUBTOTAL of Disbursements This Page (optional)..... ▶		[] 640.00	
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. Fashanu, Anjolaoluwa, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 11330c Snow Owl Pl

City Waldorf State MD Zip Code 20603

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 28 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22657

Amount of Each Disbursement this Period: 200.00

Memo Item

B. Fox, Ainsley R, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1822 Elizabeth Avenue

City Winston Salem State NC Zip Code 27103

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 15 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22658

Amount of Each Disbursement this Period: 200.00

Memo Item

C. Fox, Ainsley R, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1822 Elizabeth Avenue

City Winston Salem State NC Zip Code 27103

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 28 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22659

Amount of Each Disbursement this Period: 200.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 600.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Gaines, Mayah J, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4009 Remington Ct

City Hyattsville State MD Zip Code 20782

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: 10 / 15 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22660

Amount of Each Disbursement this Period: 200.00

Memo Item

B. Gaines, Mayah J, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4009 Remington Ct

City Hyattsville State MD Zip Code 20782

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: 10 / 28 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22661

Amount of Each Disbursement this Period: 200.00

Memo Item

C. Gandhi, Janani, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 924 Sylvan Ave

City Ann Arbor State MI Zip Code 48104

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: 10 / 15 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22662

Amount of Each Disbursement this Period: 200.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 600.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Garcia Dusbalon, Sophia, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 30 Glowing Star Pl

City Spring State TX Zip Code 77382

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 15 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22665

Amount of Each Disbursement this Period: 200.00

Memo Item

B. Garcia Dusbalon, Sophia, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 30 Glowing Star Pl

City Spring State TX Zip Code 77382

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 28 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22666

Amount of Each Disbursement this Period: 200.00

Memo Item

C. Garcia Dusbalon, Sophia, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 30 Glowing Star Pl

City Spring State TX Zip Code 77382

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 20 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22664

Amount of Each Disbursement this Period: 300.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 700.00

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. Gaur, Ambika, , ,		Date of Disbursement MM / DD / YYYY 11 / 18 / 2020	
Mailing Address 201 Maywood Way		FEC Identification Number C [] Transaction ID : SB21B.22548	
City Chapel Hill	State NC	Zip Code 27516	Amount of Each Disbursement this Period [] 240.00
Purpose of Disbursement Strategic Consulting		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. Gonzales, Gabriella, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2020	
Mailing Address 3920 Rochester Ave.		FEC Identification Number C [] Transaction ID : SB21B.22667	
City Farmington	State NM	Zip Code 87402	Amount of Each Disbursement this Period [] 200.00
Purpose of Disbursement Strategic Consulting		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) C. Gonzales, Gabriella, , ,		Date of Disbursement MM / DD / YYYY 10 / 28 / 2020	
Mailing Address 3920 Rochester Ave.		FEC Identification Number C [] Transaction ID : SB21B.22668	
City Farmington	State NM	Zip Code 87402	Amount of Each Disbursement this Period [] 200.00
Purpose of Disbursement Strategic Consulting		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:			

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

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

[] 640.00
[]

**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) A. Gonzalez, Marco J, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2020	
Mailing Address 3701 California Avenue		FEC Identification Number C [] Transaction ID : SB21B.22669 Amount of Each Disbursement this Period [] 200.00	
City Dickinson	State TX	Zip Code 77539	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. Gonzalez, Marco J, , ,		Date of Disbursement MM / DD / YYYY 10 / 28 / 2020	
Mailing Address 3701 California Avenue		FEC Identification Number C [] Transaction ID : SB21B.22670 Amount of Each Disbursement this Period [] 200.00	
City Dickinson	State TX	Zip Code 77539	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) C. Google		Date of Disbursement MM / DD / YYYY 10 / 26 / 2020	
Mailing Address 1600 Amphitheatre Parkway		FEC Identification Number C [] Transaction ID : SB21B.22521 Amount of Each Disbursement this Period [] 2.11	
City Mountain View	State CA	Zip Code 94043	Category/ Type []
Purpose of Disbursement Digital Storage		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:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 402.11
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. Gray, Alice A, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2020
Mailing Address 2604 Greenlawn Parkway		FEC Identification Number C Transaction ID : SB21B.22671 Amount of Each Disbursement this Period 200.00
City Austin	State TX	
Zip Code 78757	Purpose of Disbursement Strategic Consulting	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. Gray, Alice A, , ,		Date of Disbursement MM / DD / YYYY 10 / 28 / 2020
Mailing Address 2604 Greenlawn Parkway		FEC Identification Number C Transaction ID : SB21B.22672 Amount of Each Disbursement this Period 200.00
City Austin	State TX	
Zip Code 78757	Purpose of Disbursement Strategic Consulting	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) C. Green, Sarah R, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2020
Mailing Address 815 A Country Club Dr		FEC Identification Number C Transaction ID : SB21B.22671 Amount of Each Disbursement this Period 200.00
City Libertyville	State IL	
Zip Code 60048	Purpose of Disbursement Strategic Consulting	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:		

SUBTOTAL of Disbursements This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Green, Sarah R, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 815 A Country Club Dr

City Libertyville State IL Zip Code 60048

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 28 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22676

Amount of Each Disbursement this Period: 200.00

Memo Item

B. Green, Sarah R, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 815 A Country Club Dr

City Libertyville State IL Zip Code 60048

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 20 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22674

Amount of Each Disbursement this Period: 300.00

Memo Item

C. Gupta, Priyanka, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 305 W 98th St. Apt 2BS

City New York State NY Zip Code 10025

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 15 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22804

Amount of Each Disbursement this Period: 200.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 700.00

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. Gupta, Priyanka, , ,		Date of Disbursement MM / DD / YYYY 10 / 28 / 2020	
Mailing Address 305 W 98th St. Apt 2BS		FEC Identification Number C [] Transaction ID : SB21B.22805 Amount of Each Disbursement this Period [] 200.00	
City New York	State NY	Zip Code 10025	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. Gupta, Priyanka, , ,		Date of Disbursement MM / DD / YYYY 11 / 12 / 2020	
Mailing Address 305 W 98th St. Apt 2BS		FEC Identification Number C [] Transaction ID : SB21B.22538 Amount of Each Disbursement this Period [] 200.00	
City New York	State NY	Zip Code 10025	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) C. Guthman, Nick, , ,		Date of Disbursement MM / DD / YYYY 10 / 02 / 2020	
Mailing Address 10913 Lindblade St.		FEC Identification Number C [] Transaction ID : SB21B.22484 Amount of Each Disbursement this Period [] 500.00	
City Culver City	State CA	Zip Code 90230	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:			

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

[] 900.00

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. Gutierrez, Giovanni, , ,

Mailing Address 4201 Massachusetts Avenue NW
#8033C

City
Washington

State
DC

Zip Code
20016

Purpose of Disbursement
Strategic Consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
10 / 07 / 2020

FEC Identification Number

C

Transaction ID : SB21B.22488

Amount of Each Disbursement this Period

200.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Halpern, Madison, , ,

Mailing Address 237 North Latches Ln

City
Merion Station

State
PA

Zip Code
19066

Purpose of Disbursement
Strategic Consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
10 / 15 / 2020

FEC Identification Number

C

Transaction ID : SB21B.22677

Amount of Each Disbursement this Period

200.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Halpern, Madison, , ,

Mailing Address 237 North Latches Ln

City
Merion Station

State
PA

Zip Code
19066

Purpose of Disbursement
Strategic Consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
10 / 28 / 2020

FEC Identification Number

C

Transaction ID : SB21B.22678

Amount of Each Disbursement this Period

200.00

Memo Item

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

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

600.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial) A. Halpern, Madison, , ,			Date of Disbursement MM / DD / YYYY 11 / 12 / 2020	
Mailing Address 237 North Latches Ln				
City Merion Station	State PA	Zip Code 19066	FEC Identification Number C [] Transaction ID : SB21B.22536 Amount of Each Disbursement this Period [] 200.00	
Purpose of Disbursement Strategic Consulting			Category/Type []	
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. Harris, Rachel, , ,			Date of Disbursement MM / DD / YYYY 11 / 18 / 2020	
Mailing Address 101 S 39th Street				
City Philadelphia	State PA	Zip Code 19104	FEC Identification Number C [] Transaction ID : SB21B.22555 Amount of Each Disbursement this Period [] 240.00	
Purpose of Disbursement Strategic Consulting			Category/Type []	
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) C. Hart, Sophie, , ,			Date of Disbursement MM / DD / YYYY 10 / 15 / 2020	
Mailing Address 203 W 112th Street				
City New York	State NY	Zip Code 10026	FEC Identification Number C [] Transaction ID : SB21B.22675 Amount of Each Disbursement this Period [] 200.00	
Purpose of Disbursement Strategic Consulting			Category/Type []	
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:				

SUBTOTAL of Disbursements This Page (optional).....▶	[] 640.00
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. Hart, Sophie, , ,		Date of Disbursement MM / DD / YYYY 10 / 28 / 2020	
Mailing Address 203 W 112th Street		FEC Identification Number C [] Transaction ID : SB21B.22680	
City New York	State NY	Zip Code 10026	Amount of Each Disbursement this Period [] 200.00
Purpose of Disbursement Strategic Consulting		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. Hartz, Samuel W, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2020	
Mailing Address 4620 Kemp Drive		FEC Identification Number C [] Transaction ID : SB21B.22681	
City Portsmouth	State VA	Zip Code 23703	Amount of Each Disbursement this Period [] 200.00
Purpose of Disbursement Strategic Consulting		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) C. Hartz, Samuel W, , ,		Date of Disbursement MM / DD / YYYY 10 / 28 / 2020	
Mailing Address 4620 Kemp Drive		FEC Identification Number C [] Transaction ID : SB21B.22682	
City Portsmouth	State VA	Zip Code 23703	Amount of Each Disbursement this Period [] 200.00
Purpose of Disbursement Strategic Consulting		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:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 600.00
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial) A. Hayes, Rory L, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2020	
Mailing Address 5050 N Sheridan Rd. APT 1109		FEC Identification Number C [] Transaction ID : SB21B.22683 Amount of Each Disbursement this Period [] 200.00	
City Chicago	State IL	Zip Code 60640	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. Hayes, Rory L, , ,		Date of Disbursement MM / DD / YYYY 10 / 28 / 2020	
Mailing Address 5050 N Sheridan Rd. APT 1109		FEC Identification Number C [] Transaction ID : SB21B.22684 Amount of Each Disbursement this Period [] 200.00	
City Chicago	State IL	Zip Code 60640	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) C. Hernandez, Maria, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2020	
Mailing Address 3992 Norton Pl		FEC Identification Number C [] Transaction ID : SB21B.22685 Amount of Each Disbursement this Period [] 200.00	
City Faifax	State VA	Zip Code 22030	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:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 600.00
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial) A. Hernandez, Maria, , ,		Date of Disbursement MM / DD / YYYY 10 / 28 / 2020	
Mailing Address 3992 Norton Pl		FEC Identification Number C [] Transaction ID : SB21B.22686 Amount of Each Disbursement this Period [] 200.00	
City Faifax	State VA	Zip Code 22030	Category/ Type []
Purpose of Disbursement Strategic Consulting			
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. Hernandez, Maria, , ,		Date of Disbursement MM / DD / YYYY 11 / 20 / 2020	
Mailing Address 3992 Norton Pl		FEC Identification Number C [] Transaction ID : SB21B.22687 Amount of Each Disbursement this Period [] 300.00	
City Faifax	State VA	Zip Code 22030	Category/ Type []
Purpose of Disbursement Strategic Consulting			
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) C. Hillery, Skyler, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2020	
Mailing Address 3485 Hallmark Dr.		FEC Identification Number C [] Transaction ID : SB21B.22688 Amount of Each Disbursement this Period [] 200.00	
City Marietta	State GA	Zip Code 30067	Category/ Type []
Purpose of Disbursement Strategic Consulting			
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:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 700.00
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. Hillery, Skyler, , ,

Mailing Address 3485 Hallmark Dr.

City Marietta State GA Zip Code 30067

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: 10 / 28 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22689

Amount of Each Disbursement this Period: 200.00

Memo Item

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

Mailing Address 14122 102nd Ave NE

City Kirkland State WA Zip Code 98034

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: 10 / 15 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22690

Amount of Each Disbursement this Period: 200.00

Memo Item

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

Mailing Address 14122 102nd Ave NE

City Kirkland State WA Zip Code 98034

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: 10 / 28 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22691

Amount of Each Disbursement this Period: 200.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 600.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial) A. Hu, Jenny, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2020	
Mailing Address 11825 Quarterhorse Ct		FEC Identification Number C [] Transaction ID : SB21B.22692	
City Cincinnati	State OH	Zip Code 45249	Amount of Each Disbursement this Period [] 200.00
Purpose of Disbursement Strategic Consulting		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. Hu, Jenny, , ,		Date of Disbursement MM / DD / YYYY 10 / 28 / 2020	
Mailing Address 11825 Quarterhorse Ct		FEC Identification Number C [] Transaction ID : SB21B.22693	
City Cincinnati	State OH	Zip Code 45249	Amount of Each Disbursement this Period [] 200.00
Purpose of Disbursement Strategic Consulting		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) C. Hussain, Nayha, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2020	
Mailing Address 63 Wood Hollow Cir		FEC Identification Number C [] Transaction ID : SB21B.22694	
City Greer	State SC	Zip Code 29650	Amount of Each Disbursement this Period [] 200.00
Purpose of Disbursement Strategic Consulting		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:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 600.00
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial)

A. Hussain, Nayha, , ,

Mailing Address 63 Wood Hollow Cir

City Greer

State SC

Zip Code 29650

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
10 / 28 / 2020

FEC Identification Number

C

Transaction ID : SB21B.22695

Amount of Each Disbursement this Period

200.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Joerg, Robert, , ,

Mailing Address 2227 S. State Apt. 210

City Ann Arbor

State MI

Zip Code 48104

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
10 / 08 / 2020

FEC Identification Number

C

Transaction ID : SB21B.22493

Amount of Each Disbursement this Period

1250.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Joerg, Robert, , ,

Mailing Address 2227 S. State Apt. 210

City Ann Arbor

State MI

Zip Code 48104

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
10 / 30 / 2020

FEC Identification Number

C

Transaction ID : SB21B.2253t

Amount of Each Disbursement this Period

1250.00

Memo Item

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

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

2700.00

**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. Jordan Jr, Laten V, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 8238 Kathleen Circle

City Reynoldsburg State OH Zip Code 43068

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 15 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22696

Amount of Each Disbursement this Period: 200.00

Memo Item

B. Jordan Jr, Laten V, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 8238 Kathleen Circle

City Reynoldsburg State OH Zip Code 43068

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 28 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22697

Amount of Each Disbursement this Period: 200.00

Memo Item

C. Kacholia, Suhan, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3656 E Sagittarius Place

City Chandler State AZ Zip Code 85249

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 15 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22698

Amount of Each Disbursement this Period: 200.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 600.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Kacholia, Suhan, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3656 E Sagittarius Place

City Chandler State AZ Zip Code 85249

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 28 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22699

Amount of Each Disbursement this Period: 200.00

Memo Item

B. Kellum, Madison E, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 8330 Truxton avenue

City Los Angeles State CA Zip Code 90045

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 15 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22700

Amount of Each Disbursement this Period: 200.00

Memo Item

C. Kellum, Madison E, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 8330 Truxton avenue

City Los Angeles State CA Zip Code 90045

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 28 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22701

Amount of Each Disbursement this Period: 200.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 600.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Khan, Nirvana, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2086 Gillen Ln

City Falls Church State VA Zip Code 22043

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 15 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22702

Amount of Each Disbursement this Period: 200.00

Memo Item

B. Khan, Nirvana, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2086 Gillen Ln

City Falls Church State VA Zip Code 22043

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 28 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22703

Amount of Each Disbursement this Period: 200.00

Memo Item

C. Kimani, William, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 137A Williams St

City Taunton State MA Zip Code 02780

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 15 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22704

Amount of Each Disbursement this Period: 200.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 600.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial) A. Kimani, William, , ,		Date of Disbursement MM / DD / YYYY 10 / 28 / 2020	
Mailing Address 137A Williams St		FEC Identification Number C [] Transaction ID : SB21B.22705 Amount of Each Disbursement this Period [] 200.00	
City Taunton	State MA	Zip Code 02780	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. Kimani, William, , ,		Date of Disbursement MM / DD / YYYY 11 / 20 / 2020	
Mailing Address 137A Williams St		FEC Identification Number C [] Transaction ID : SB21B.22706 Amount of Each Disbursement this Period [] 300.00	
City Taunton	State MA	Zip Code 02780	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) C. Klein, Scott, , ,		Date of Disbursement MM / DD / YYYY 11 / 18 / 2020	
Mailing Address 6416 Cloverdale Blvd		FEC Identification Number C [] Transaction ID : SB21B.22546 Amount of Each Disbursement this Period [] 240.00	
City Bayside	State NY	Zip Code 11364	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:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 740.00
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. Kouassi, Lisa A, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1710 Rutland Pass Dr.

City Lawrenceville State GA Zip Code 30045

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 10 / 15 / 2020

FEC Identification Number C

Transaction ID : SB21B.22707

Amount of Each Disbursement this Period 200.00

Memo Item

B. Lee, Allison H, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1501 Robert E Lee Blvd

City New Orleans State LA Zip Code 70122

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 10 / 15 / 2020

FEC Identification Number C

Transaction ID : SB21B.22710

Amount of Each Disbursement this Period 200.00

Memo Item

C. Lee, Allison H, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1501 Robert E Lee Blvd

City New Orleans State LA Zip Code 70122

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 10 / 28 / 2020

FEC Identification Number C

Transaction ID : SB21B.22711

Amount of Each Disbursement this Period 200.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 600.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Lee, Allison H, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1501 Robert E Lee Blvd

City New Orleans State LA Zip Code 70122

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 20 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22709

Amount of Each Disbursement this Period: 300.00

Memo Item

B. Lee, Scott, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 389 S. Burnside Ave

City Los Angeles State CA Zip Code 90036

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 15 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22712

Amount of Each Disbursement this Period: 200.00

Memo Item

C. Lee, Scott, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 389 S. Burnside Ave

City Los Angeles State CA Zip Code 90036

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 28 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22713

Amount of Each Disbursement this Period: 200.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 700.00

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. Luna, Itzel, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 13080 Dronfield Ave
Unit 1

City Sylmar State CA Zip Code 91342

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 15 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22714

Amount of Each Disbursement this Period: 200.00

Memo Item

B. Luna, Itzel, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 13080 Dronfield Ave
Unit 1

City Sylmar State CA Zip Code 91342

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 28 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22715

Amount of Each Disbursement this Period: 200.00

Memo Item

C. Mahmud, Zarrin, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 79-36 258th St.

City Glen Oaks State NY Zip Code 11004

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 15 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22716

Amount of Each Disbursement this Period: 200.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 600.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Mahmud, Zarrin, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 79-36 258th St.

City Glen Oaks State NY Zip Code 11004

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 28 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22717

Amount of Each Disbursement this Period: 200.00

Memo Item

B. Maingi, Joan, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4403 Silverbrook LN

City Owings Mills State MD Zip Code 21117

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 15 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22718

Amount of Each Disbursement this Period: 200.00

Memo Item

C. Maingi, Joan, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4403 Silverbrook LN

City Owings Mills State MD Zip Code 21117

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 28 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22719

Amount of Each Disbursement this Period: 200.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 600.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial) A. Martino, Rhett M, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2020	
Mailing Address 1433 Indian Valley Road #A		FEC Identification Number C [] Transaction ID : SB21B.22722 Amount of Each Disbursement this Period [] 200.00	
City Novato	State CA	Zip Code 94947	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. Martino, Rhett M, , ,		Date of Disbursement MM / DD / YYYY 10 / 28 / 2020	
Mailing Address 1433 Indian Valley Road #A		FEC Identification Number C [] Transaction ID : SB21B.22723 Amount of Each Disbursement this Period [] 200.00	
City Novato	State CA	Zip Code 94947	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) C. Martino, Rhett M, , ,		Date of Disbursement MM / DD / YYYY 11 / 20 / 2020	
Mailing Address 1433 Indian Valley Road #A		FEC Identification Number C [] Transaction ID : SB21B.22721 Amount of Each Disbursement this Period [] 300.00	
City Novato	State CA	Zip Code 94947	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		

SUBTOTAL of Disbursements This Page (optional).....▶	[] 700.00
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. Massimi, Natalie, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2020	
Mailing Address 601 W 138th St. 4D		FEC Identification Number C [] Transaction ID : SB21B.22724 Amount of Each Disbursement this Period [] 200.00	
City New York	State NY	Zip Code 10031	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. Massimi, Natalie, , ,		Date of Disbursement MM / DD / YYYY 10 / 28 / 2020	
Mailing Address 601 W 138th St. 4D		FEC Identification Number C [] Transaction ID : SB21B.22725 Amount of Each Disbursement this Period [] 200.00	
City New York	State NY	Zip Code 10031	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) C. Mathur, Anusha, , ,		Date of Disbursement MM / DD / YYYY 11 / 18 / 2020	
Mailing Address 1430 Greenbriar Road		FEC Identification Number C [] Transaction ID : SB21B.22551 Amount of Each Disbursement this Period [] 240.00	
City Glendale	State CA	Zip Code 91207	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:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 640.00
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. Mervosh, Anna G, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2020	
Mailing Address 125 Ellison Street		FEC Identification Number C [] Transaction ID : SB21B.22726 Amount of Each Disbursement this Period [] 250.00	
City Suffield	State CT	Zip Code 06078	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. Mervosh, Anna G, , ,		Date of Disbursement MM / DD / YYYY 10 / 28 / 2020	
Mailing Address 125 Ellison Street		FEC Identification Number C [] Transaction ID : SB21B.22727 Amount of Each Disbursement this Period [] 250.00	
City Suffield	State CT	Zip Code 06078	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) C. Mervosh, Anna G, , ,		Date of Disbursement MM / DD / YYYY 11 / 20 / 2020	
Mailing Address 125 Ellison Street		FEC Identification Number C [] Transaction ID : SB21B.22728 Amount of Each Disbursement this Period [] 300.00	
City Suffield	State CT	Zip Code 06078	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

SUBTOTAL of Disbursements This Page (optional).....▶	[] 800.00
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. Michael, Hannah, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3810 Canton Dr

City Pearlland State TX Zip Code 77584

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 15 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22729

Amount of Each Disbursement this Period: 200.00

Memo Item

B. Miller, Abigail J, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2949 Headwater Drive

City Fort Collins State CO Zip Code 80521

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 15 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22730

Amount of Each Disbursement this Period: 200.00

Memo Item

C. Miller, Abigail J, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2949 Headwater Drive

City Fort Collins State CO Zip Code 80521

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 28 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22731

Amount of Each Disbursement this Period: 200.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 600.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial)

A. Muthukrishnan, Ananya, , ,

Mailing Address 4046 Chestnut St

City Philadelphia

State PA

Zip Code 19104

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
11 / 18 / 2020

FEC Identification Number

C
Transaction ID : SB21B.22553
Amount of Each Disbursement this Period
240.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Narayanan, Aaditi, , ,

Mailing Address 23 Wildwood Drive

City Sherborn

State MA

Zip Code 01770

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
10 / 15 / 2020

FEC Identification Number

C
Transaction ID : SB21B.22732
Amount of Each Disbursement this Period
200.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Narayanan, Aaditi, , ,

Mailing Address 23 Wildwood Drive

City Sherborn

State MA

Zip Code 01770

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
10 / 28 / 2020

FEC Identification Number

C
Transaction ID : SB21B.22733
Amount of Each Disbursement this Period
200.00

Memo Item

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

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

640.00

**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. Nibert, Mariah C, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 7530 Hillsdale Drive

City Pleasanton State CA Zip Code 94588

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 15 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22734

Amount of Each Disbursement this Period: 200.00

Memo Item

B. Nibert, Mariah C, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 7530 Hillsdale Drive

City Pleasanton State CA Zip Code 94588

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 28 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22735

Amount of Each Disbursement this Period: 200.00

Memo Item

C. Participant Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 8425 Nassau Point Rd

City Cutchogue State NY Zip Code 11935

Purpose of Disbursement Software

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 16 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22511

Amount of Each Disbursement this Period: 1000.00

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)

<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. Paspalis, Matthew P, , ,

Mailing Address 130 Sycamore St.

City
Santa Cruz

State
CA

Zip Code
95060

Purpose of Disbursement
Strategic Consulting

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.22737

Amount of Each Disbursement this Period

300.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Patkar, Neha J, , ,

Mailing Address 1340 Vancouver Avenue

City
Burlingame

State
CA

Zip Code
94010

Purpose of Disbursement
Strategic Consulting

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.22740

Amount of Each Disbursement this Period

200.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Patterson, Rachael, , ,

Mailing Address 6814 N. Lakewood Ave
Apt 1A

City
Chicago

State
IL

Zip Code
60626

Purpose of Disbursement
Strategic Consulting

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.22741

Amount of Each Disbursement this Period

200.00

Memo Item

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

700.00

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. Patterson, Rachael, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 6814 N. Lakewood Ave
Apt 1A

City Chicago State IL Zip Code 60626

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 28 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22742

Amount of Each Disbursement this Period: 200.00

Memo Item

B. Penson, Ryan Z, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 180 Tallowood Dr.

City Clifton Park State NY Zip Code 12065

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 15 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22743

Amount of Each Disbursement this Period: 200.00

Memo Item

C. Penson, Ryan Z, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 180 Tallowood Dr.

City Clifton Park State NY Zip Code 12065

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 28 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22744

Amount of Each Disbursement this Period: 200.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 600.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Pierce, Katherine H, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2414 Mitford Ct

City Dacula State GA Zip Code 30019

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 15 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22745

Amount of Each Disbursement this Period: 200.00

Memo Item

B. Ponce, Karla J, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 14 S Charter St

City Madison State WI Zip Code 53715

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 15 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22746

Amount of Each Disbursement this Period: 200.00

Memo Item

C. Ponce, Karla J, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 14 S Charter St

City Madison State WI Zip Code 53715

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 28 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22747

Amount of Each Disbursement this Period: 200.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 600.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Pote, Jillian, , ,

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM / DD / YYYY
11 / 18 / 2020

Mailing Address 140 Kressman Road

City Easton State PA Zip Code 18042

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number: C

Transaction ID : SB21B.22547

Amount of Each Disbursement this Period: 240.00

Memo Item

B. Powell, Rachel L, , ,

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM / DD / YYYY
10 / 15 / 2020

Mailing Address 417 W 120th St Apt 4C

City New York State NY Zip Code 10027

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number: C

Transaction ID : SB21B.22750

Amount of Each Disbursement this Period: 250.00

Memo Item

C. Powell, Rachel L, , ,

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM / DD / YYYY
10 / 28 / 2020

Mailing Address 417 W 120th St Apt 4C

City New York State NY Zip Code 10027

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number: C

Transaction ID : SB21B.22751

Amount of Each Disbursement this Period: 250.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 740.00

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. Powell, Rachel L, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 417 W 120th St
Apt 4C

City New York State NY Zip Code 10027

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 20 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22749

Amount of Each Disbursement this Period: 300.00

Memo Item

B. Rafailova, Bella, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 6622 Fleet Street
APT 1M

City Forest Hills State NY Zip Code 11375

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 15 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22752

Amount of Each Disbursement this Period: 200.00

Memo Item

C. Rafailova, Bella, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 6622 Fleet Street
APT 1M

City Forest Hills State NY Zip Code 11375

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 28 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22753

Amount of Each Disbursement this Period: 200.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 700.00

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. Ravala, Bhavana, , ,

Mailing Address 6100 Grand Meadow Ln

City
Flower Mound

State
TX

Zip Code
75028

Purpose of Disbursement
Strategic Consulting

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			15			2020			

FEC Identification Number

C []

Transaction ID : SB21B.22754

Amount of Each Disbursement this Period

[] 200.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Ravala, Bhavana, , ,

Mailing Address 6100 Grand Meadow Ln

City
Flower Mound

State
TX

Zip Code
75028

Purpose of Disbursement
Strategic Consulting

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			28			2020			

FEC Identification Number

C []

Transaction ID : SB21B.22755

Amount of Each Disbursement this Period

[] 200.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Reardon, Margaret B, , ,

Mailing Address 49 Grafton Avenue

City
Milton

State
MA

Zip Code
02186

Purpose of Disbursement
Strategic Consulting

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			15			2020			

FEC Identification Number

C []

Transaction ID : SB21B.22756

Amount of Each Disbursement this Period

[] 200.00

Memo Item

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

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

[] 600.00

[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Reynoso, Maria G, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 12917 Kerrydale Rd

City Woodbridge State VA Zip Code 22193

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 23 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22566

Amount of Each Disbursement this Period: 2000.00

Memo Item

B. Rollerson, Lauren, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3501 S Woodland Dr

City Radcliff State KY Zip Code 40160

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 15 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22758

Amount of Each Disbursement this Period: 200.00

Memo Item

C. Rollerson, Lauren, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3501 S Woodland Dr

City Radcliff State KY Zip Code 40160

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 28 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22758

Amount of Each Disbursement this Period: 200.00

Memo Item

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

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

2400.00

**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) A. Rubin, Julia, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2020	
Mailing Address 1213 Prospect Street		FEC Identification Number C [] Transaction ID : SB21B.22760 Amount of Each Disbursement this Period [] 200.00	
City Ann Arbor	State MI	Zip Code 48104	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. Rubin, Julia, , ,		Date of Disbursement MM / DD / YYYY 10 / 28 / 2020	
Mailing Address 1213 Prospect Street		FEC Identification Number C [] Transaction ID : SB21B.22761 Amount of Each Disbursement this Period [] 200.00	
City Ann Arbor	State MI	Zip Code 48104	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) C. Sally, Olivia, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2020	
Mailing Address 19588 Carlton Ct.		FEC Identification Number C [] Transaction ID : SB21B.22762 Amount of Each Disbursement this Period [] 200.00	
City Castro Valley	State CA	Zip Code 94546	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:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 600.00
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial)

A. Sandler, Reiff, Lamb, Rosenstein & Birkenstock, PC

Date of Disbursement

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

Mailing Address 1090 Vermont Ave. NW
Suite 750

City Washington State DC Zip Code 20005

Purpose of Disbursement
Legal Services

FEC Identification Number

C

Transaction ID : SB21B.22557
Amount of Each Disbursement this Period

1159.00

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

B. Schaeffler, Andrew R, , ,

Date of Disbursement

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

Mailing Address 221 West Mosley Street

City Ann Arbor State MI Zip Code 48103

Purpose of Disbursement
Strategic Consulting

FEC Identification Number

C

Transaction ID : SB21B.22763
Amount of Each Disbursement this Period

200.00

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

C. Schaeffler, Andrew R, , ,

Date of Disbursement

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

Mailing Address 221 West Mosley Street

City Ann Arbor State MI Zip Code 48103

Purpose of Disbursement
Strategic Consulting

FEC Identification Number

C

Transaction ID : SB21B.22764
Amount of Each Disbursement this Period

200.00

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

State: District:

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

1559.00

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. Setow, Joanna, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 342 West Squantum St

City Quincy State MA Zip Code 02171

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 15 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22765

Amount of Each Disbursement this Period: 200.00

Memo Item

B. Setow, Joanna, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 342 West Squantum St

City Quincy State MA Zip Code 02171

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 20 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22766

Amount of Each Disbursement this Period: 300.00

Memo Item

C. Sind, Lily M, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 14941 Whitfield Avenue

City Pacific Palisades State CA Zip Code 90272

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 15 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22767

Amount of Each Disbursement this Period: 200.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 700.00

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. Sind, Lily M, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 14941 Whitfield Avenue

City Pacific Palisades State CA Zip Code 90272

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 28 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22768

Amount of Each Disbursement this Period: 200.00

Memo Item

B. Skilton, Andrew I, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 9306 Elmhirst Drive

City Bethesda State MD Zip Code 20814

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 15 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22769

Amount of Each Disbursement this Period: 200.00

Memo Item

C. Skilton, Andrew I, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 9306 Elmhirst Drive

City Bethesda State MD Zip Code 20814

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 28 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22770

Amount of Each Disbursement this Period: 200.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 600.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial) A. Son, Jiahn, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2020	
Mailing Address 31 Wescott Street		FEC Identification Number C [] Transaction ID : SB21B.22771 Amount of Each Disbursement this Period [] 200.00	
City Old Tappan	State NJ	Zip Code 07675	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. Son, Jiahn, , ,		Date of Disbursement MM / DD / YYYY 10 / 28 / 2020	
Mailing Address 31 Wescott Street		FEC Identification Number C [] Transaction ID : SB21B.22772 Amount of Each Disbursement this Period [] 200.00	
City Old Tappan	State NJ	Zip Code 07675	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) C. Son, Jiahn, , ,		Date of Disbursement MM / DD / YYYY 11 / 12 / 2020	
Mailing Address 31 Wescott Street		FEC Identification Number C [] Transaction ID : SB21B.22537 Amount of Each Disbursement this Period [] 200.00	
City Old Tappan	State NJ	Zip Code 07675	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:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 600.00
TOTAL This Period (last page this line number only).....▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial)

A. Son, Jiahn, , ,

Mailing Address 31 Wescott Street

City Old Tappan State NJ Zip Code 07675

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
11 / 20 / 2020

FEC Identification Number

C
Transaction ID : SB21B.22773
Amount of Each Disbursement this Period
300.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Spector, Jordan S, , ,

Mailing Address 22 Badger Drive

City Skillman State NJ Zip Code 08558

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
10 / 15 / 2020

FEC Identification Number

C
Transaction ID : SB21B.22774
Amount of Each Disbursement this Period
250.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Spector, Jordan S, , ,

Mailing Address 22 Badger Drive

City Skillman State NJ Zip Code 08558

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
10 / 28 / 2020

FEC Identification Number

C
Transaction ID : SB21B.22775
Amount of Each Disbursement this Period
250.00

Memo Item

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

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

800.00

**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

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

NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial) A. Spencer, Eric, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2020	
Mailing Address 404 Ranch View Road		FEC Identification Number C [] Transaction ID : SB21B.22776	
City Santa Cruz	State CA	Zip Code 95064	Amount of Each Disbursement this Period [] 200.00
Purpose of Disbursement Strategic Consulting		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. Spencer, Eric, , ,		Date of Disbursement MM / DD / YYYY 10 / 28 / 2020	
Mailing Address 404 Ranch View Road		FEC Identification Number C [] Transaction ID : SB21B.22777	
City Santa Cruz	State CA	Zip Code 95064	Amount of Each Disbursement this Period [] 200.00
Purpose of Disbursement Strategic Consulting		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) C. Srinivas, Preranaa, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2020	
Mailing Address 25 Florence Circle		FEC Identification Number C [] Transaction ID : SB21B.22778	
City Upton	State MA	Zip Code 01568	Amount of Each Disbursement this Period [] 200.00
Purpose of Disbursement Strategic Consulting		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:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 600.00
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

A. Srinivas, Preranaa, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 25 Florence Circle

City Upton State MA Zip Code 01568

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 28 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22779

Amount of Each Disbursement this Period: 200.00

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

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 30 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22526

Amount of Each Disbursement this Period: 5000.00

Memo Item

C. Stauffer, Anne R, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4506 Woodlake Run

City Owensboro State KY Zip Code 42303

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 15 / 2020

FEC Identification Number: C

Transaction ID : SB21B.2278c

Amount of Each Disbursement this Period: 200.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 5400.00

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. Stauffer, Anne R, , ,		Date of Disbursement MM / DD / YYYY 10 / 28 / 2020	
Mailing Address 4506 Woodlake Run		FEC Identification Number C [] Transaction ID : SB21B.22781 Amount of Each Disbursement this Period [] 200.00	
City Owensboro	State KY	Zip Code 42303	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. Stoneback, Cassidy E, , ,		Date of Disbursement MM / DD / YYYY 10 / 15 / 2020	
Mailing Address 4500 Connecticut Ave NW APT 606		FEC Identification Number C [] Transaction ID : SB21B.22783 Amount of Each Disbursement this Period [] 200.00	
City Washington	State DC	Zip Code 20008	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) C. Stoneback, Cassidy E, , ,		Date of Disbursement MM / DD / YYYY 11 / 20 / 2020	
Mailing Address 4500 Connecticut Ave NW APT 606		FEC Identification Number C [] Transaction ID : SB21B.22782 Amount of Each Disbursement this Period [] 300.00	
City Washington	State DC	Zip Code 20008	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:			

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

[] 700.00

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. Strong, Cassidy, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 9617 White Carriage Drive

City Wake Forest State NC Zip Code 27587

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 15 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22784

Amount of Each Disbursement this Period: 200.00

Memo Item

B. Strong, Cassidy, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 9617 White Carriage Drive

City Wake Forest State NC Zip Code 27587

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 20 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22785

Amount of Each Disbursement this Period: 300.00

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: 10 / 20 / 2020

FEC Identification Number: C

Transaction ID : SB21B.2252t

Amount of Each Disbursement this Period: 5500.00

Memo Item

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

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

6000.00

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. Tavecchi, Faria, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 7801 Royal Oaks Road

City Las Vegas State NV Zip Code 89123

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 15 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22786

Amount of Each Disbursement this Period: 200.00

Memo Item

B. Tavecchi, Faria, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 7801 Royal Oaks Road

City Las Vegas State NV Zip Code 89123

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 28 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22787

Amount of Each Disbursement this Period: 200.00

Memo Item

C. Taylor, Karson L, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 42 Elm Creek Way

City Aurora State OH Zip Code 44202

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 15 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22788

Amount of Each Disbursement this Period: 200.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 600.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial)

A. Taylor, Karson L, , ,

Mailing Address 42 Elm Creek Way

City
Aurora

State
OH

Zip Code
44202

Purpose of Disbursement
Strategic Consulting

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			28			2020			

FEC Identification Number

C

Transaction ID : SB21B.22789

Amount of Each Disbursement this Period

200.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Thomas, Megha, , ,

Mailing Address 2 Lori Court

City
Somerset

State
NJ

Zip Code
08873

Purpose of Disbursement
Strategic Consulting

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			18			2020			

FEC Identification Number

C

Transaction ID : SB21B.22552

Amount of Each Disbursement this Period

240.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Thompson, Camille, , ,

Mailing Address 1743 Misselthrush Lane

City
Mcdonough

State
GA

Zip Code
30253

Purpose of Disbursement
Strategic Consulting

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			15			2020			

FEC Identification Number

C

Transaction ID : SB21B.2279c

Amount of Each Disbursement this Period

200.00

Memo Item

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

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

640.00

**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. Thompson, Camille, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1743 Misselthrush Lane

City McDonough State GA Zip Code 30253

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 28 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22791

Amount of Each Disbursement this Period: 200.00

Memo Item

B. Tides Advocacy

Full Name (Last, First, Middle Initial)

Mailing Address 1014 Torney Ave.

City San Francisco State CA Zip Code 94129

Purpose of Disbursement Operations Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 20 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22558

Amount of Each Disbursement this Period: 4000.00

Memo Item

C. Touche, Emilie, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 98 Maynard Road

City Sudbury State MA Zip Code 01776

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 15 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22792

Amount of Each Disbursement this Period: 200.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 4400.00

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. Touche, Emilie, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 98 Maynard Road

City Sudbury State MA Zip Code 01776

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 28 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22793

Amount of Each Disbursement this Period: 200.00

Memo Item

B. Troupe, Sanaalee, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 610 Clare Rd

City Uniondale State NY Zip Code 11553

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 15 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22794

Amount of Each Disbursement this Period: 200.00

Memo Item

C. Troupe, Sanaalee, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 610 Clare Rd

City Uniondale State NY Zip Code 11553

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 28 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22795

Amount of Each Disbursement this Period: 200.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 600.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial)

A. Unfiltered Media LLC

Mailing Address 2663 Manhattan Place
#102

City Vienna State VA Zip Code 22180

Purpose of Disbursement
Digital Consulting Services

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
11 / 12 / 2020

FEC Identification Number

C
Transaction ID : SB21B.22541
Amount of Each Disbursement this Period
1200.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Veera, Alisha, , ,

Mailing Address 432 Abbott Road

City Paramus State NJ Zip Code 07652

Purpose of Disbursement
Strategic Consulting

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
10 / 15 / 2020

FEC Identification Number

C
Transaction ID : SB21B.22796
Amount of Each Disbursement this Period
250.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Veera, Alisha, , ,

Mailing Address 432 Abbott Road

City Paramus State NJ Zip Code 07652

Purpose of Disbursement
Strategic Consulting

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
10 / 28 / 2020

FEC Identification Number

C
Transaction ID : SB21B.22797
Amount of Each Disbursement this Period
250.00

Memo Item

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

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

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. Warner, Sierra, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 243 Kings Cove

City Locust Grove State GA Zip Code 30248

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 15 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22798

Amount of Each Disbursement this Period: 200.00

Memo Item

B. Warner, Sierra, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 243 Kings Cove

City Locust Grove State GA Zip Code 30248

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 28 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22799

Amount of Each Disbursement this Period: 200.00

Memo Item

C. Welch, Katharine, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2815 York Avenue ASPT 4

City Cleveland State OH Zip Code 44113

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 28 / 2020

FEC Identification Number: C

Transaction ID : SB21B.22802

Amount of Each Disbursement this Period: 200.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 600.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial)

A. Zoom Inc.

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
10 / 02 / 2020

FEC Identification Number

C

Transaction ID : SB21B.22485

Amount of Each Disbursement this Period

53.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Zoom Inc.

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
11 / 09 / 2020

FEC Identification Number

C

Transaction ID : SB21B.22533

Amount of Each Disbursement this Period

53.00

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

106.00

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

81495.96

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial) A. BULLDOG DEMOCRATS		Date of Disbursement MM / DD / YYYY 10 / 07 / 2020	
Mailing Address 206 ELM ST PO#204036		FEC Identification Number C 000419754 Transaction ID : SB23.22486	
City NEW HAVEN	State CT	Zip Code 06520	Amount of Each Disbursement this Period 500.00
Purpose of Disbursement Contribution		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.		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		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) C.		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		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:			

SUBTOTAL of Disbursements This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

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 Processing Fees - IE Only Account

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 23 / 2020

FEC Identification Number: C

Transaction ID : SB29.22465

Amount of Each Disbursement this Period: 72.68

Memo Item

B. Amalgamated Bank

Full Name (Last, First, Middle Initial)

Mailing Address 1825 K Street, N.W

City Washington State DC Zip Code 20006

Purpose of Disbursement Bank Charges - IE Only Account

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 29 / 2020

FEC Identification Number: C

Transaction ID : SB29.22478

Amount of Each Disbursement this Period: 10.42

Memo Item

C. Andrews, James, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 736 1/2 Hyperion Ave

City Los Angeles State CA Zip Code 90029

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: 10 / 13 / 2020

FEC Identification Number: C

Transaction ID : SB29.22476

Amount of Each Disbursement this Period: 500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 583.10

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. Civitech		Date of Disbursement MM / DD / YYYY 10 / 02 / 2020
Mailing Address 1023 Springdale Rd 13E		FEC Identification Number C [] Transaction ID : SB29.22469 Amount of Each Disbursement this Period [] 500.00
City Austin	State TX	Zip Code 78721
Purpose of Disbursement Software - IE Only Account		Category/ Type []
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. Civitech		Date of Disbursement MM / DD / YYYY 11 / 02 / 2020
Mailing Address 1023 Springdale Rd 13E		FEC Identification Number C [] Transaction ID : SB29.22479 Amount of Each Disbursement this Period [] 500.00
City Austin	State TX	Zip Code 78721
Purpose of Disbursement Software - IE Only Account		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. District of Columbia College Democrats		Date of Disbursement MM / DD / YYYY 10 / 29 / 2020
Mailing Address 36 St Mary's St.		FEC Identification Number C [] Transaction ID : SB29.22524 Amount of Each Disbursement this Period [] 300.00
City Newton	State MA	Zip Code 02462
Purpose of Disbursement Non-Federal Donation		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 1300.00
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. Google		Date of Disbursement MM / DD / YYYY 10 / 06 / 2020
Mailing Address 1600 Amphitheatre Parkway		FEC Identification Number C [REDACTED] Transaction ID : SB29.22472
City Mountain View	State CA	Zip Code 94043
Purpose of Disbursement Technology Fee - IE Only Account		Amount of Each Disbursement this Period [REDACTED] 35.40
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. Google		Date of Disbursement MM / DD / YYYY 11 / 06 / 2020
Mailing Address 1600 Amphitheatre Parkway		FEC Identification Number C [REDACTED] Transaction ID : SB29.22480
City Mountain View	State CA	Zip Code 94043
Purpose of Disbursement Technology Fee - IE Only Account		Amount of Each Disbursement this Period [REDACTED] 32.00
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) C. Guthman, Nick, , ,		Date of Disbursement MM / DD / YYYY 10 / 28 / 2020
Mailing Address 10913 Lindblade St.		FEC Identification Number C [REDACTED] Transaction ID : SB29.22477
City Culver City	State CA	Zip Code 90230
Purpose of Disbursement Strategic Consulting - IE Only Account		Amount of Each Disbursement this Period [REDACTED] 4000.00
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:		

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

[REDACTED] 4067.40

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

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

Full Name (Last, First, Middle Initial) A. Guthman, Nick, , ,		Date of Disbursement MM / DD / YYYY 11 / 20 / 2020	
Mailing Address 10913 Lindblade St.		FEC Identification Number C [] Transaction ID : SB29.22481 Amount of Each Disbursement this Period [] 4750.00	
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. Sheldon, Max, , ,		Date of Disbursement MM / DD / YYYY 10 / 13 / 2020	
Mailing Address 17343 Knapp St.		FEC Identification Number C [] Transaction ID : SB29.22474 Amount of Each Disbursement this Period [] 500.00	
City Northridge	State CA	Zip Code 91325	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) C. Stahr, Morgan, , ,		Date of Disbursement MM / DD / YYYY 10 / 02 / 2020	
Mailing Address 515 S Poplar St		FEC Identification Number C [] Transaction ID : SB29.22468 Amount of Each Disbursement this Period [] 500.00	
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	State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 5750.00
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

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 Office Supplies - IE Only Account

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 10 / 07 / 2020

FEC Identification Number C

Transaction ID : SB29.22473

Amount of Each Disbursement this Period 304.00

Memo Item

B. 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

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 10 / 05 / 2020

FEC Identification Number C

Transaction ID : SB29.22471

Amount of Each Disbursement this Period 1200.00

Memo Item

C. Welch, Katherine, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1955 Bells Ferry Road Apt 4112

City Marietta State GA Zip Code 30066

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 10 / 02 / 2020

FEC Identification Number C

Transaction ID : SB29.22470

Amount of Each Disbursement this Period 1500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	3004.00
TOTAL This Period (last page this line number only).....▶	14704.50