

**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

ColorOfChange PAC

ADDRESS (number and street)

1714 Franklin St.

#100-136

Check if different
than previously
reported. (ACC)

Oakland

CA

94612

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C

C00428557

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)
(Non-Election
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)
(Non-Election
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

[]

(d) 30-Day
POST-Election
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

[]

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

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

Savado, Ismael, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Savado, Ismael, , ,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

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

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

ColorOfChange PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
11		27		2018

To:

M M	/	D D	/	Y Y Y Y Y
12		31		2018

	COLUMN A This Period	COLUMN B Calendar Year-to-Date															
6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="5">2018</td></tr></table>	Y	Y	Y	Y	Y	2018						<table><tr><td colspan="5">446861.26</td></tr></table>	446861.26				
Y	Y	Y	Y	Y													
2018																	
446861.26																	
(b) Cash on Hand at Beginning of Reporting Period.....	<table><tr><td colspan="5">1071951.28</td></tr></table>	1071951.28															
1071951.28																	
(c) Total Receipts (from Line 19)	<table><tr><td colspan="5">186840.31</td></tr></table>	186840.31					<table><tr><td colspan="5">5535115.95</td></tr></table>	5535115.95									
186840.31																	
5535115.95																	
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table><tr><td colspan="5">1258791.59</td></tr></table>	1258791.59					<table><tr><td colspan="5">5981977.21</td></tr></table>	5981977.21									
1258791.59																	
5981977.21																	
7. Total Disbursements (from Line 31).....	<table><tr><td colspan="5">334324.02</td></tr></table>	334324.02					<table><tr><td colspan="5">5057509.64</td></tr></table>	5057509.64									
334324.02																	
5057509.64																	
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table><tr><td colspan="5">924467.57</td></tr></table>	924467.57					<table><tr><td colspan="5">924467.57</td></tr></table>	924467.57									
924467.57																	
924467.57																	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
0.00																	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
0.00																	



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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

ColorOfChange PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
11		27		2018

To:

M M	/	D D	/	Y Y Y Y
12		31		2018

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).....	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	0.00	0.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	186840.31	5535115.95
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))	186840.31	5535115.95
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	186840.31	5535115.95

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	2.50
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	2.50
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	12214.23
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	334324.02	5045292.91
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)) ..	334324.02	5057509.64
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	334324.02	5057509.64

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)	0.00	0.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	2.50
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	0.00	2.50

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

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

FOR LINE NUMBER: PAGE 6 OF 203

(check only one)

<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

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)

ColorOfChange PAC

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

A. Ackerman, Maribeth, , ,

Mailing Address 1943 253rd Pl

City
LomitaState
CAZip Code
90717-1848FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Universal Music Publishing GroupOccupation (for Individual)
Director Royalties

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	/	30	/	2018

Transaction ID : VTQZWHKHN58

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

B. Ackerman, Maribeth, , ,

Mailing Address 1943 253rd Pl

City
LomitaState
CAZip Code
90717-1848FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Universal Music Publishing GroupOccupation (for Individual)
Director Royalties

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
12	/	28	/	2018

Transaction ID : VTQZWHKJHY5

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

C. Ackerman, Thomas, , ,

Mailing Address 4424 Griffin Ave

City
Los AngelesState
CAZip Code
90031-1420FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CARMAXOccupation (for Individual)
Sales

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
12	/	14	/	2018

Transaction ID : VTQZWHKJ5D5

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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: PAGE 7 OF 203

(check only one)

<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)

ColorOfChange PAC

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

A. Akina-James, Sadikifu, , ,

Mailing Address 1122 E Pike St
1223City
SeattleState
WAZip Code
98122-3916FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	07	/	2018

Transaction ID : VTQZWHKJ084

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

B. Andersen, Erika, , ,

Mailing Address 93 Timber Line Trail

City

West Park

State
NYZip Code
12493FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Proteus International IncOccupation (for Individual)
CEO Author

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
12	/	21	/	2018

Transaction ID : VTQZWHKJ959

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

C. Baier, Ellen, , ,

Mailing Address 10 Brook Dr

City

Burlington

State
VTZip Code
05408-1103FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Gray TVOccupation (for Individual)
Traffic Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2018

Transaction ID : VTQZWHKHGS4

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

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

45.00

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

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

FOR LINE NUMBER: PAGE 8 OF 203
(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Baier, Ellen, , ,

Mailing Address 10 Brook Dr

City
Burlington

State
VT

Zip Code
05408-1103

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Gray TV

Occupation (for Individual)
Traffic Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

12 / **14** / **2018**

Transaction ID : VTQZWHKJ4E0

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

B. Baier, Ellen, , ,

Mailing Address 10 Brook Dr

City
Burlington

State
VT

Zip Code
05408-1103

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Gray TV

Occupation (for Individual)
Traffic Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

12 / **28** / **2018**

Transaction ID : VTQZWHKJCM4

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

C. Bandler, Willa, , ,

Mailing Address 555 Winter St

City
Walpole

State
MA

Zip Code
02081-1006

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 ▼

300.00

Date of Receipt

12 / **14** / **2018**

Transaction ID : VTQZWHKJ4W1

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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: PAGE 9 OF 203

(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Banks, Veta, , ,

Mailing Address 955 E 3rd St
Unit 307

City
Long Beach

State
CA

Zip Code
90802-6710

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 ▼

206.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 14 / 2018

Transaction ID : VTQZWHKJ5E3

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

B. Banks, Veta, , ,

Mailing Address 955 E 3rd St
Unit 307

City
Long Beach

State
CA

Zip Code
90802-6710

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 ▼

206.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 21 / 2018

Transaction ID : VTQZWHKJ8V2

Amount of Each Receipt this Period

5.00

☐ Memo Item

Non-Contribution Account

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

C. Barrett, Lisa, , ,

Mailing Address 1350 Sherman Hollow Rd

City
Huntington

State
VT

Zip Code
05462-9416

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/A

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5590.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 21 / 2018

Transaction ID : VTQZWHKJB47

Amount of Each Receipt this Period

30.00

☐ Memo Item

Non-Contribution Account

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

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

45.00

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

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

FOR LINE NUMBER: PAGE 10 OF 203
(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Bay, Rosemary, , ,

Mailing Address 324 Hudson View Ter

City
Hyde Park

State
NY

Zip Code
12538-3552

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 ▼

235.00

Date of Receipt

12 / **14** / **2018**

Transaction ID : VTQZWHKJ6Q5

Amount of Each Receipt this Period

5.00

☐ Memo Item

Non-Contribution Account

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

B. Beard, Hilary, , ,

Mailing Address 415 Glen Echo Rd

City
Philadelphia

State
PA

Zip Code
19119-2915

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-Employed

Occupation (for Individual)
Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

12 / **07** / **2018**

Transaction ID : VTQZWHKH8

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

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

C. Biegelsen, Beth, , ,

Mailing Address 6306 Broad Branch Rd

City
Chevy Chase

State
MD

Zip Code
20815-3342

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Kaiser Permanente

Occupation (for Individual)
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

211.00

Date of Receipt

11 / **30** / **2018**

Transaction ID : VTQZWHKHJC7

Amount of Each Receipt this Period

3.00

☐ Memo Item

Non-Contribution Account

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

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

28.00

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

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

FOR LINE NUMBER: PAGE 11 OF 203

(check only one)

<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)

ColorOfChange PAC

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

A. Biegelsen, Beth, , ,

Mailing Address 6306 Broad Branch Rd

City
Chevy Chase

State
MD

Zip Code
20815-3342

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Kaiser Permanente

Occupation (for Individual)
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		14		2018

Transaction ID : VTQZWHKJ544

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

B. Biegelsen, Beth, , ,

Mailing Address 6306 Broad Branch Rd

City
Chevy Chase

State
MD

Zip Code
20815-3342

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Kaiser Permanente

Occupation (for Individual)
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		28		2018

Transaction ID : VTQZWHKJFN8

Amount of Each Receipt this Period

3.00

☐ Memo Item

Non-Contribution Account

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

C. Bing, Jennifer, , ,

Mailing Address 735 Andover St

City
San Francisco

State
CA

Zip Code
94110-6017

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-Employed

Occupation (for Individual)
Event Producer

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
12		07		2018

Transaction ID : VTQZWHKJ091

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

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

53.00

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 12 OF 203

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Bloom, Matthew, , ,

Mailing Address 149 Congress St

City
Brooklyn

State
NY

Zip Code
11201-6103

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WSMS

Occupation (for Individual)
Administration

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

11 / 30 / 2018

Transaction ID : VTQZWHKHHE0

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

B. Bloom, Matthew, , ,

Mailing Address 149 Congress St

City
Brooklyn

State
NY

Zip Code
11201-6103

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WSMS

Occupation (for Individual)
Administration

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

12 / 28 / 2018

Transaction ID : VTQZWHKJET7

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

C. Bowra, Susanne, , ,

Mailing Address 7712 Hellman Rd

City
Clinton

State
WA

Zip Code
98236-9407

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Pfizer

Occupation (for Individual)
Field Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

499.00

Date of Receipt

12 / 07 / 2018

Transaction ID : VTQZWHKJ1R3

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

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

250.00

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

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

FOR LINE NUMBER: PAGE 13 OF 203

(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Bowra, Susanne, , ,

Mailing Address 7712 Hellman Rd

City
Clinton

State
WA

Zip Code
98236-9407

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Pfizer

Occupation (for Individual)

Field Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.00

Date of Receipt

12 / 28 / 2018

Transaction ID : VTQZWHKJK35

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

B. Broadwell, Nikki, , ,

Mailing Address 15021 N Swan Rd

City
Tucson

State
AZ

Zip Code
85739-9080

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-Employed

Occupation (for Individual)
Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

12 / 07 / 2018

Transaction ID : VTQZWHKHZR7

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

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

C. Burns, Phoebe, , ,

Mailing Address 193 Osborn St

City
Philadelphia

State
PA

Zip Code
19128-3716

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 ▼

310.00

Date of Receipt

12 / 07 / 2018

Transaction ID : VTQZWHKHXG0

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

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

95.00

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

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

FOR LINE NUMBER: PAGE 14 OF 203

(check only one)

<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)

ColorOfChange PAC

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

A. Calos, Elaine, , ,

Mailing Address 20719 Darren Dr

City
BaysideState
NYZip Code
11360-1177FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NoneOccupation (for Individual)
Retired

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
12		14		2018

Transaction ID : VTQZWHKJ3H1

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

B. Cartwright, Esther, , ,

Mailing Address 7 Lowell St

City
AshevilleState
NCZip Code
28803-2545FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AVL TechnologiesOccupation (for Individual)
Human Resources

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
12		07		2018

Transaction ID : VTQZWHKHZV1

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

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

C. Cazden, Courtney, , ,

Mailing Address 1010 Waltham St

City
LexingtonState
MAZip Code
02421-8044FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NoneOccupation (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
12		14		2018

Transaction ID : VTQZWHKJ5Q4

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

55.00

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 15 OF 203

(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Coffin, Sandra, , ,

Mailing Address 250 W 104th St

City
New York

State
NY

Zip Code
10025-4220

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Musician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 30 / 2018

Transaction ID : VTQZWHKHTW9

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

B. Coffin, Sandra, , ,

Mailing Address 250 W 104th St

City
New York

State
NY

Zip Code
10025-4220

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Musician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 28 / 2018

Transaction ID : VTQZWHKJCT1

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

C. Cole, Norma, , ,

Mailing Address 282 28th St

City
San Francisco

State
CA

Zip Code
94131-2359

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

University of San Francisco

Occupation (for Individual)

Lecturer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 30 / 2018

Transaction ID : VTQZWHKHPZ3

Amount of Each Receipt this Period

5.00

☐ Memo Item

Non-Contribution Account

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

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

55.00

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

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

FOR LINE NUMBER: PAGE 16 OF 203

(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Collins, Maggie, , ,

Mailing Address 535 Geary St
Apt 502

City
San Francisco

State
CA

Zip Code
94102-1630

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Bay Ship & Yacht

Occupation (for Individual)

Project Superintendent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

12 / 07 / 2018

Transaction ID : VTQZWHKHV68

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

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

B. ColorOfChange.org

Mailing Address 1714 Franklin St
100-136

City
Oakland

State
CA

Zip Code
94612-3488

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 ▼

123747.84

Date of Receipt

12 / 05 / 2018

Transaction ID : VTQZWHKHD26

Amount of Each Receipt this Period

45552.29

☐ Memo Item

Refund of Salary Overpayment, Non-Contribution Account

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

c. ColorOfChange.org

Mailing Address 1714 Franklin St
100-136

City
Oakland

State
CA

Zip Code
94612-3488

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 ▼

123747.84

Date of Receipt

12 / 17 / 2018

Transaction ID : VTQZWHKHD34

Amount of Each Receipt this Period

953.69

☐ Memo Item

Refund of Salary Overpayment, Non-Contribution Account

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

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

46525.98

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

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

FOR LINE NUMBER: PAGE 17 OF 203

(check only one)

<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)

ColorOfChange PAC

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

A. Conant, Alison, , ,

Mailing Address 68 Brookside Ave

City
NewtonvilleState
MAZip Code
02460-1530FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

980.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2018

Transaction ID : VTQZWHKHDW1

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

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

B. Conant, Alison, , ,

Mailing Address 68 Brookside Ave

City
NewtonvilleState
MAZip Code
02460-1530FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

980.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		21		2018

Transaction ID : VTQZWHKJBN1

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

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

C. Condega, Laura, , ,

Mailing Address 27 Gates Rd

City
PrincetonState
MAZip Code
01541-1601FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Springfield Public SchoolsOccupation (for Individual)
Teacher

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
12		07		2018

Transaction ID : VTQZWHKHZA9

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

50.00

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 18 OF 203

(check only one)

<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)

ColorOfChange PAC

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

A. Condega, Laura, , ,

Mailing Address 27 Gates Rd

City
PrincetonState
MAZip Code
01541-1601FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Springfield Public SchoolsOccupation (for Individual)
Teacher

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
12		07		2018

Transaction ID : VTQZWHKHZF8

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

B. Connors, Julie, , ,

Mailing Address 71 Lafayette Ave NE

City
Grand RapidsState
MIZip Code
49503-3336FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NoneOccupation (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
12		07		2018

Transaction ID : VTQZWHKHVW2

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

C. Conway, John, , ,

Mailing Address 7716 Annandale Mains Ct

City
AnnandaleState
VAZip Code
22003-2430FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
Consultant

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		30		2018

Transaction ID : VTQZWHKHS96

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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 19 OF 203

(check only one)

<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

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)

ColorOfChange PAC

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

A. Conway, John, , ,

Mailing Address 7716 Annandale Mains Ct

City

Annandale

State

VA

Zip Code

22003-2430

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Consultant

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
12		21		2018

Transaction ID : VTQZWHKJ7P0

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

B. Crabtree, Meg, , ,

Mailing Address 3732 Elm Ave

City

Long Beach

State

CA

Zip Code

90807-3402

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Designory

Occupation (for Individual)

Creative Director

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		30		2018

Transaction ID : VTQZWHKHFN2

Amount of Each Receipt this Period

35.00

☐ Memo Item

Non-Contribution Account

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

C. Crabtree, Meg, , ,

Mailing Address 3732 Elm Ave

City

Long Beach

State

CA

Zip Code

90807-3402

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Designory

Occupation (for Individual)

Creative Director

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
12		21		2018

Transaction ID : VTQZWHKJC55

Amount of Each Receipt this Period

35.00

☐ Memo Item

Non-Contribution Account

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

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

95.00

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 20 OF 203

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Curtis, Susan, , ,

Mailing Address 1842 Spaight St

City
Madison

State
WI

Zip Code
53704-5547

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 ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 30 / 2018

Transaction ID : VTQZWHKHTV1

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

B. Curtis, Susan, , ,

Mailing Address 1842 Spaight St

City
Madison

State
WI

Zip Code
53704-5547

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 ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 28 / 2018

Transaction ID : VTQZWHKJCV9

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

C. Daglas, Andrew, , ,

Mailing Address 525 W Deming Pl

City
Chicago

State
IL

Zip Code
60614-5973

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Dentons

Occupation (for Individual)
Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1180.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 30 / 2018

Transaction ID : VTQZWHKHDS8

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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)
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Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Daglas, Andrew, , ,

Mailing Address 525 W Deming Pl

City
Chicago

State
IL

Zip Code
60614-5973

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Dentons

Occupation (for Individual)

Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1180.00

Date of Receipt

12 / 21 / 2018

Transaction ID : VTQZWHKJBP9

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

B. Daniels, Beth, , ,

Mailing Address 3224 E 51st St

City

Minneapolis

State

MN

Zip Code

55417-1443

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Beth H. Daniels Consulting

Occupation (for Individual)

Educator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

11 / 30 / 2018

Transaction ID : VTQZWHKHKC8

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

C. Daniels, Beth, , ,

Mailing Address 3224 E 51st St

City

Minneapolis

State

MN

Zip Code

55417-1443

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Beth H. Daniels Consulting

Occupation (for Individual)

Educator

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

12 / 07 / 2018

Transaction ID : VTQZWHKHZS5

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

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

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

40.00

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)

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Daniels, Beth, , ,

Mailing Address 3224 E 51st St

City
Minneapolis

State
MN

Zip Code
55417-1443

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Beth H. Daniels Consulting

Occupation (for Individual)

Educator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

12 / 28 / 2018

Transaction ID : VTQZWHKJDD1

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

B. Dans, Ronald, , ,

Mailing Address 200 Sunnyslope St

City
Santa Fe

State
NM

Zip Code
87501

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 ▼

380.00

Date of Receipt

12 / 07 / 2018

Transaction ID : VTQZWHKHZX7

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

C. Davidson, Emily, , ,

Mailing Address 2 Grace Ct
Apt 2A

City
Brooklyn Hgts

State
NY

Zip Code
11201-4150

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

City University of New York

Occupation (for Individual)

College Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

12 / 07 / 2018

Transaction ID : VTQZWHKJ000

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

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

60.00

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

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

FOR LINE NUMBER: PAGE 23 OF 203
(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Fitzsimons, Colleen, , ,

Mailing Address 255 41st St
Apt 1

City
Oakland

State
CA

Zip Code
94611-5627

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Urban Fabrick

Occupation (for Individual)
Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 30 / 2018

Transaction ID : VTQZWHKHTR7

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

B. Fitzsimons, Colleen, , ,

Mailing Address 255 41st St
Apt 1

City
Oakland

State
CA

Zip Code
94611-5627

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Urban Fabrick

Occupation (for Individual)
Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 28 / 2018

Transaction ID : VTQZWHKJGS3

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

C. Foldy, Erica, , ,

Mailing Address 44 Grove Rd

City
Natick

State
MA

Zip Code
01760-2337

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
New York University

Occupation (for Individual)
Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 30 / 2018

Transaction ID : VTQZWHKHJV5

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

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

30.00

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

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

FOR LINE NUMBER: PAGE 24 OF 203
(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Foldy, Erica, , ,

Mailing Address 44 Grove Rd

City
Natick

State
MA

Zip Code
01760-2337

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
New York University

Occupation (for Individual)
Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 30 / 2018

Transaction ID : VTQZWHKHJY9

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

B. Foldy, Erica, , ,

Mailing Address 44 Grove Rd

City
Natick

State
MA

Zip Code
01760-2337

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
New York University

Occupation (for Individual)
Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 28 / 2018

Transaction ID : VTQZWHKJFV6

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

C. Foldy, Erica, , ,

Mailing Address 44 Grove Rd

City
Natick

State
MA

Zip Code
01760-2337

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
New York University

Occupation (for Individual)
Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 28 / 2018

Transaction ID : VTQZWHKJFY9

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

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

30.00

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

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

FOR LINE NUMBER: PAGE 25 OF 203

(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Gelman, Emmaia, , ,

Mailing Address 39 W 105th St
Apt 4

City
New York

State
NY

Zip Code
10025-4058

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

None

Occupation (for Individual)

Student

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

12 / 14 / 2018

Transaction ID : VTQZWHKJ3Z2

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

B. Gelman, Emmaia, , ,

Mailing Address 39 W 105th St
Apt 4

City
New York

State
NY

Zip Code
10025-4058

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

None

Occupation (for Individual)

Student

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

12 / 14 / 2018

Transaction ID : VTQZWHKJ400

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

C. Gjertsen, Margaret, , ,

Mailing Address 3347 Ridgcrest Ct

City
Raleigh

State
NC

Zip Code
27607-6764

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 ▼

285.00

Date of Receipt

12 / 07 / 2018

Transaction ID : VTQZWHKH53

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

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

45.00

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

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

FOR LINE NUMBER: PAGE 26 OF 203

(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Goldsmith, Rachel, , ,

Mailing Address 142 Carolina Ave

City
Boston

State
MA

Zip Code
02130-3202

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.00

Date of Receipt

11 / **30** / **2018**

Transaction ID : VTQZWHKHEA2

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

B. Goldsmith, Rachel, , ,

Mailing Address 142 Carolina Ave

City
Boston

State
MA

Zip Code
02130-3202

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.00

Date of Receipt

12 / **21** / **2018**

Transaction ID : VTQZWHKJB96

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

C. Goldstein, Scott, , ,

Mailing Address 2252 Ontario Rd NW

City
Washington

State
DC

Zip Code
20009-2607

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Tremendousness

Occupation (for Individual)

Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

11 / **30** / **2018**

Transaction ID : VTQZWHKH74

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

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

75.00

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

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

FOR LINE NUMBER: PAGE 27 OF 203
(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Goldstein, Scott, , ,

Mailing Address 2252 Ontario Rd NW

City
Washington

State
DC

Zip Code
20009-2607

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tremendousness

Occupation (for Individual)
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

12 / **28** / **2018**

Transaction ID : VTQZWHKJJ01

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

B. Goodman, Nancy, , ,

Mailing Address 12 Calebs Ln

City
Rockport

State
MA

Zip Code
01966-1704

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Gloucester Public Schools

Occupation (for Individual)
Counselor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

643.00

Date of Receipt

12 / **07** / **2018**

Transaction ID : VTQZWHKJ1Y0

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

C. Goodwin, Sally, , ,

Mailing Address 3677 Woodland Hall Ln

City
Clinton

State
WA

Zip Code
98236-8628

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-Employed

Occupation (for Individual)
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

11 / **30** / **2018**

Transaction ID : VTQZWHKHED6

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

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

60.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 28 OF 203

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Goodwin, Sally, , ,

Mailing Address 3677 Woodland Hall Ln

City
Clinton

State
WA

Zip Code
98236-8628

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

12 / **21** / **2018**

Transaction ID : VTQZWHKJ840

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

B. Gould, Diana, , ,

Mailing Address 14709 Bestor Blvd

City

Pacific Palisades

State

CA

Zip Code

90272-2613

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

12 / **21** / **2018**

Transaction ID : VTQZWHKJ8X6

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

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

C. Haas, Colleen, , ,

Mailing Address 69 Crecienta Dr

City

Sausalito

State

CA

Zip Code

94965-1882

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 ▼

8050.00

Date of Receipt

11 / **30** / **2018**

Transaction ID : VTQZWHKHSN1

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

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

145.00

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

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

FOR LINE NUMBER: PAGE 29 OF 203
(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Haas, Colleen, , ,

Mailing Address 69 Crecienta Dr

City
Sausalito

State
CA

Zip Code
94965-1882

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 ▼

8050.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 28 / 2018

Transaction ID : VTQZWHKJK02

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

B. Halperin, Jason, , ,

Mailing Address 1115 Thalia St

City
New Orleans

State
LA

Zip Code
70130-4229

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
New York University

Occupation (for Individual)
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 07 / 2018

Transaction ID : VTQZWHKH61

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

C. Hanson, Walter, , ,

Mailing Address 2364 Highland Loop

City
Port Townsend

State
WA

Zip Code
98368-5924

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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 30 / 2018

Transaction ID : VTQZWHKHGN2

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

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

135.00

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)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
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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)

ColorOfChange PAC

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

A. Hanson, Walter, , ,

Mailing Address 2364 Highland Loop

City

Port Townsend

State

WA

Zip Code

98368-5924

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

None

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

11 / 30 / 2018

Transaction ID : VTQZWHKHN90

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

B. Hanson, Walter, , ,

Mailing Address 2364 Highland Loop

City

Port Townsend

State

WA

Zip Code

98368-5924

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

None

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

12 / 28 / 2018

Transaction ID : VTQZWHKJCZ1

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

C. Hanson, Walter, , ,

Mailing Address 2364 Highland Loop

City

Port Townsend

State

WA

Zip Code

98368-5924

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

None

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

12 / 28 / 2018

Transaction ID : VTQZWHKJJ27

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

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

30.00

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

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

FOR LINE NUMBER: PAGE 31 OF 203

(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Hawkins, Sheila, , ,

Mailing Address 769 Parkhaven Way

City
Sacramento

State
CA

Zip Code
95831-2626

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 ▼

315.00

Date of Receipt

12 / **14** / **2018**

Transaction ID : VTQZWHKJ4D2

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

B. Henle, Toni, , ,

Mailing Address 609 N Taylor Ave

City
Oak Park

State
IL

Zip Code
60302-1747

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
None

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

12 / **07** / **2018**

Transaction ID : VTQZWHKJ0G7

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

C. House, Tim, , ,

Mailing Address 92 Elm St

City
Upton

State
MA

Zip Code
01568-1125

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
First Church Boston

Occupation (for Individual)
Clergy

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

245.00

Date of Receipt

11 / **30** / **2018**

Transaction ID : VTQZWHKHQ92

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

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

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

70.00

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

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

FOR LINE NUMBER: PAGE 32 OF 203

(check only one)

<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)

ColorOfChange PAC

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

A. Howells, Cynthia, , ,

Mailing Address 518 W 111th St
Apt 22

City
New York

State
NY

Zip Code
10025-1923

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 ▼

253.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2018

Transaction ID : VTQZWHKJ5M0

Amount of Each Receipt this Period

15.00

☐ Memo Item

Non-Contribution Account

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

B. Johnson, Ayana, , ,

Mailing Address 232 Cumberland St
3

City
Brooklyn

State
NY

Zip Code
11205-4653

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-Employed

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 / 30 / 2018

Transaction ID : VTQZWHKHKE4

Amount of Each Receipt this Period

30.00

☐ Memo Item

Non-Contribution Account

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

C. Johnson, Ayana, , ,

Mailing Address 232 Cumberland St
3

City
Brooklyn

State
NY

Zip Code
11205-4653

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-Employed

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
 12 / 28 / 2018

Transaction ID : VTQZWHKJDE9

Amount of Each Receipt this Period

30.00

☐ Memo Item

Non-Contribution Account

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

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

75.00

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

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

FOR LINE NUMBER: PAGE 33 OF 203

(check only one)

<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)

ColorOfChange PAC

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

A. Johnson, Charles, , ,

Mailing Address 23 Ashton Ct

City
DallasState
TXZip Code
75230-1977FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NoneOccupation (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		30		2018

Transaction ID : VTQZWHKHQR1

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

B. Johnson, Crystal, , ,

Mailing Address 6065 Dimm Way

City
RichmondState
CAZip Code
94805-1215FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		14		2018

Transaction ID : VTQZWHKJ755

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

C. Jones, David, , ,

Mailing Address 3473 S King Dr
421City
ChicagoState
ILZip Code
60616-4108FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
Consultant

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
12		21		2018

Transaction ID : VTQZWHKJ9V3

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

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

250.00

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

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

FOR LINE NUMBER: PAGE 34 OF 203

(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Kaiser, Christy, , ,

Mailing Address 4849 Connecticut Ave NW
Apt 1019

City
Washington

State
DC

Zip Code
20008-5848

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Medstar

Occupation (for Individual)
Doctor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

12 / **14** / **2018**

Transaction ID : VTQZWHKJ730

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

B. Kenyon, Carolyn, , ,

Mailing Address 1000 Cayuga Heights Rd

City
Ithaca

State
NY

Zip Code
14850-1035

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-Employed

Occupation (for Individual)
Social Worker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / **30** / **2018**

Transaction ID : VTQZWHKHHV3

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

C. Kenyon, Carolyn, , ,

Mailing Address 1000 Cayuga Heights Rd

City
Ithaca

State
NY

Zip Code
14850-1035

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-Employed

Occupation (for Individual)
Social Worker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

12 / **28** / **2018**

Transaction ID : VTQZWHKJF60

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

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

70.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 OF 203

(check only one)

<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)

ColorOfChange PAC

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

A. Lambert, Ruth, , ,

Mailing Address 100 York St

City
New HavenState
CTZip Code
06511-5620FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NoneOccupation (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
12		07		2018

Transaction ID : VTQZWHKJ0W2

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

B. Leaf, Erika, , ,

Mailing Address 31086 Fox Hollow Rd

City
EugeneState
ORZip Code
97405-9576FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2018

Transaction ID : VTQZWHKHS23

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

C. Leigh, Simone, , ,

Mailing Address 104 Montgomery St
2BCity
BrooklynState
NYZip Code
11225-2008FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
Visual Artist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1470.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		07		2018

Transaction ID : VTQZWHKHWE2

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

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

360.00

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

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

FOR LINE NUMBER: PAGE 36 OF 203
(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Leigh, Simone, , ,

Mailing Address 104 Montgomery St
2B

City
Brooklyn

State
NY

Zip Code
11225-2008

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Visual Artist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1470.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 14 / 2018

Transaction ID : VTQZWHKJ5C7

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

B. Lentz, Barry, , ,

Mailing Address 1011 Westcott St

City

Syracuse

State

NY

Zip Code

13210-3058

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 28 / 2018

Transaction ID : VTQZWHKJKD4

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

C. Leu, Lucy, , ,

Mailing Address 4062 Renton Ave S

City

Seattle

State

WA

Zip Code

98108-1668

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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 30 / 2018

Transaction ID : VTQZWHKHQN7

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

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

350.00

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

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

FOR LINE NUMBER: PAGE 37 OF 203
(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Lima, Anthony, , ,

Mailing Address 172-20 133 Ave Apt 7C

City
Jamaica

State
NY

Zip Code
11434

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 ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 07 / 2018

Transaction ID : VTQZWHKHWC6

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

B. Livingston-Andersona, Sharee, , ,

Mailing Address 212 Settlers Bnd

City
Lancaster

State
PA

Zip Code
17601-2949

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Holrmc

Occupation (for Individual)
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 30 / 2018

Transaction ID : VTQZWHKHWN0

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

C. Madison, Paula, , ,

Mailing Address 3369 Fryman Pl

City
Studio City

State
CA

Zip Code
91604-4113

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
None

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 30 / 2018

Transaction ID : VTQZWHKHFG2

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

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

60.00

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

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

FOR LINE NUMBER: PAGE 38 OF 203
(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Madison, Paula, , ,

Mailing Address 3369 Fryman Pl

City
Studio City

State
CA

Zip Code
91604-4113

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
None

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

12 / 21 / 2018

Transaction ID : VTQZWHKJ8Y4

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

B. Mann, Lisa, , ,

Mailing Address 51 E 2nd St

City
Brooklyn

State
NY

Zip Code
11218-1019

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TOLA Architecture PLLC

Occupation (for Individual)
Architect

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.00

Date of Receipt

12 / 07 / 2018

Transaction ID : VTQZWHKHXX4

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

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

C. Marcotte, Ethan, , ,

Mailing Address 38 Cambria St
1

City
Somerville

State
MA

Zip Code
02143-1502

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-Employed

Occupation (for Individual)
Web Designer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

11 / 30 / 2018

Transaction ID : VTQZWHKHHER3

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

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

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

50.00

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

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

FOR LINE NUMBER: PAGE 39 OF 203

(check only one)

<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)

ColorOfChange PAC

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

A. Marcotte, Ethan, , ,

Mailing Address 38 Cambria St
1City
SomervilleState
MAZip Code
02143-1502FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Web Designer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	21	/	2018

Transaction ID : VTQZWHKJ8D1

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

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

B. McAuliffe, Carole, , ,

Mailing Address 40 Way 35 Off Briar

City
WellfleetState
MAZip Code
02667-7233FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

None

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2018

Transaction ID : VTQZWHKHGV0

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

C. McAuliffe, Carole, , ,

Mailing Address 40 Way 35 Off Briar

City
WellfleetState
MAZip Code
02667-7233FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

None

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	28	/	2018

Transaction ID : VTQZWHKJCH0

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

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

70.00

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

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

FOR LINE NUMBER: PAGE 40 OF 203

(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. McClure, Janet, , ,

Mailing Address 537 Ocean View Ave

City
Encinitas

State
CA

Zip Code
92024-2629

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
VA

Occupation (for Individual)
RN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 30 / 2018

Transaction ID : VTQZWHKHND1

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

B. McClure, Janet, , ,

Mailing Address 537 Ocean View Ave

City
Encinitas

State
CA

Zip Code
92024-2629

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
VA

Occupation (for Individual)
RN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 28 / 2018

Transaction ID : VTQZWHKJJ68

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

C. McDonnell, Claire, , ,

Mailing Address 333 Capp St

City
San Francisco

State
CA

Zip Code
94110-1807

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
True Link Financial

Occupation (for Individual)
Business

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 30 / 2018

Transaction ID : VTQZWHKHJF1

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

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

150.00

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

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

FOR LINE NUMBER: PAGE 41 OF 203

(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. McDonnell, Claire, , ,

Mailing Address 333 Capp St

City

San Francisco

State

CA

Zip Code

94110-1807

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

True Link Financial

Occupation (for Individual)

Business

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 28 / 2018

Transaction ID : VTQZWHKJE43

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

B. McFeeley, Sandra, , ,

Mailing Address 390 Tuskarora Trl

City

Mooresville

State

NC

Zip Code

28117-7319

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

None

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

530.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 30 / 2018

Transaction ID : VTQZWHKHTT3

Amount of Each Receipt this Period

40.00

☐ Memo Item

Non-Contribution Account

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

C. McFeeley, Sandra, , ,

Mailing Address 390 Tuskarora Trl

City

Mooresville

State

NC

Zip Code

28117-7319

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

None

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

530.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 28 / 2018

Transaction ID : VTQZWHKJCX5

Amount of Each Receipt this Period

40.00

☐ Memo Item

Non-Contribution Account

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

130.00

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 42 OF 203
(check only one)

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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. McSwigan, John, , ,

Mailing Address 6358 NE Rosebay Dr

City
Hillsboro

State
OR

Zip Code
97124-5044

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 ▼

395.00

Date of Receipt

11 / 30 / 2018

Transaction ID : VTQZWHKHJS0

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

B. McSwigan, John, , ,

Mailing Address 6358 NE Rosebay Dr

City
Hillsboro

State
OR

Zip Code
97124-5044

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 ▼

395.00

Date of Receipt

12 / 28 / 2018

Transaction ID : VTQZWHKJFS0

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

C. Meisel, Myron, , ,

Mailing Address 2780 McConnell Dr

City
Los Angeles

State
CA

Zip Code
90064-3444

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 ▼

400.99

Date of Receipt

11 / 30 / 2018

Transaction ID : VTQZWHKHFE6

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

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

75.00

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

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

FOR LINE NUMBER: PAGE 43 OF 203
(check only one)

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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Meisel, Myron, , ,

Mailing Address 2780 McConnell Dr

City
Los Angeles

State
CA

Zip Code
90064-3444

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 ▼

400.99

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 21 / 2018

Transaction ID : VTQZWHKJC14

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

B. Meyer, Nancy, , ,

Mailing Address 50 Hayfields Rd

City
Portola Valley

State
CA

Zip Code
94028-7249

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
None

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 14 / 2018

Transaction ID : VTQZWHKJ425

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

C. Minkoff, Debra, , ,

Mailing Address 454 Riverside Dr

City
New York

State
NY

Zip Code
10027-6845

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Barnard College

Occupation (for Individual)
Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 30 / 2018

Transaction ID : VTQZWHKHJD5

Amount of Each Receipt this Period

15.00

☐ Memo Item

Non-Contribution Account

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

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

50.00

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

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

FOR LINE NUMBER: PAGE 44 OF 203

(check only one)

<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

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)

ColorOfChange PAC

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

A. Minkoff, Debra, , ,

Mailing Address 454 Riverside Dr

City
New YorkState
NYZip Code
10027-6845FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Barnard CollegeOccupation (for Individual)
Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	28	/	2018

Transaction ID : VTQZWHKJFP6

Amount of Each Receipt this Period

15.00

☐ Memo Item

Non-Contribution Account

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

B. Molloy, Roselee, , ,

Mailing Address 157 Meadowcroft Dr

City
San AnselmoState
CAZip Code
94960-1506FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Bay Area Legal AidOccupation (for Individual)
Attorney

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
12	/	07	/	2018

Transaction ID : VTQZWHKHYP8

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

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

C. Montague, Miccaela, , ,

Mailing Address 1821 108th Ave

City
OaklandState
CAZip Code
94603-3909FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
College TrackOccupation (for Individual)
Program Director

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	/	30	/	2018

Transaction ID : VTQZWHKHM71

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

45.00

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 45 OF 203

(check only one)

<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)

ColorOfChange PAC

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

A. Montague, Miccaela, , ,

Mailing Address 1821 108th Ave

City
OaklandState
CAZip Code
94603-3909FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
College TrackOccupation (for Individual)
Program Director

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
12	/	07	/	2018

Transaction ID : VTQZWHKHX3

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

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

B. Montague, Miccaela, , ,

Mailing Address 1821 108th Ave

City
OaklandState
CAZip Code
94603-3909FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
College TrackOccupation (for Individual)
Program Director

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
12	/	07	/	2018

Transaction ID : VTQZWHKHVD9

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

C. Moore, Mary Annis, , ,

Mailing Address 518 Thelma Dr

City
San AntonioState
TXZip Code
78212-2458FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NoneOccupation (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
12	/	07	/	2018

Transaction ID : VTQZWHKHWW2

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

40.00

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 46 OF 203
(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Morton, Regina, , ,

Mailing Address PO Box 262327

City
Memphis

State
TN

Zip Code
38186

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 ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 30 / 2018

Transaction ID : VTQZWHKHHB6

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

B. Morton, Regina, , ,

Mailing Address PO Box 262327

City
Memphis

State
TN

Zip Code
38186

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 ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 28 / 2018

Transaction ID : VTQZWHKJDM7

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

C. Nettles, Adam, , ,

Mailing Address 2730 Dale St N
Apt 312

City
Roseville

State
MN

Zip Code
55113-2321

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Optum

Occupation (for Individual)
Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 30 / 2018

Transaction ID : VTQZWHKHKX2

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

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

225.00

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

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

FOR LINE NUMBER: PAGE 47 OF 203
(check only one)

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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Nettles, Adam, , ,

Mailing Address 2730 Dale St N
Apt 312

City
Roseville

State
MN

Zip Code
55113-2321

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Optum

Occupation (for Individual)

Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

12 / 28 / 2018

Transaction ID : VTQZWHKJDX8

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

B. Nigra, Louis, , ,

Mailing Address 200 W Grand Ave
Apt 1202

City
Chicago

State
IL

Zip Code
60654-4476

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 ▼

295.00

Date of Receipt

11 / 30 / 2018

Transaction ID : VTQZWHKHQV4

Amount of Each Receipt this Period

35.00

☐ Memo Item

Non-Contribution Account

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

C. Nigra, Louis, , ,

Mailing Address 200 W Grand Ave
Apt 1202

City
Chicago

State
IL

Zip Code
60654-4476

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 ▼

295.00

Date of Receipt

12 / 07 / 2018

Transaction ID : VTQZWHKHVK1

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

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

70.00

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

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

FOR LINE NUMBER: PAGE 48 OF 203

(check only one)

<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

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)

ColorOfChange PAC

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

A. Nigra, Louis, , ,

Mailing Address 200 W Grand Ave
Apt 1202City
ChicagoState
ILZip Code
60654-4476FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NoneOccupation (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
12	/	14	/	2018

Transaction ID : VTQZWHKJ2X3

Amount of Each Receipt this Period

15.00

☐ Memo Item

Non-Contribution Account

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

B. Nigra, Louis, , ,

Mailing Address 200 W Grand Ave
Apt 1202City
ChicagoState
ILZip Code
60654-4476FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NoneOccupation (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
12	/	21	/	2018

Transaction ID : VTQZWHKJAC7

Amount of Each Receipt this Period

35.00

☐ Memo Item

Non-Contribution Account

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

C. O'Grady, Lorraine, , ,

Mailing Address 155 Bank St
Apt D-348City
New YorkState
NYZip Code
10014-2049FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

465.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2018

Transaction ID : VTQZWHKHT65

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

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: PAGE 49 OF 203
(check only one)

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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. O'Grady, Lorraine, , ,

Mailing Address 155 Bank St
Apt D-348

City
New York

State
NY

Zip Code
10014-2049

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 ▼

465.00

Date of Receipt

12 / 28 / 2018

Transaction ID : VTQZWHKJG96

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

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

B. Ortiz, Christine, , ,

Mailing Address 20 W Lucerne Cir
Apt 314

City
Orlando

State
FL

Zip Code
32801-3703

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Equity Design Collaborative

Occupation (for Individual)
Co-Founder

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

11 / 30 / 2018

Transaction ID : VTQZWHKHFF14

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

C. Patalano-Salsman, Susan, , ,

Mailing Address 175P Centre St

City
Quincy

State
MA

Zip Code
02169-8639

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CPCT UMASS Boston

Occupation (for Individual)
Student

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

11 / 30 / 2018

Transaction ID : VTQZWHKHPQ0

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

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

170.00

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

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

FOR LINE NUMBER: PAGE 50 OF 203
(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Pawley, Emily, , ,

Mailing Address 151 Bellair Park Rd

B

City
Carlisle

State
PA

Zip Code
17013-9642

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Dickinson College

Occupation (for Individual)
Historian

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 30 / 2018

Transaction ID : VTQZWHKHGG3

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

B. Pawley, Emily, , ,

Mailing Address 151 Bellair Park Rd

B

City
Carlisle

State
PA

Zip Code
17013-9642

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Dickinson College

Occupation (for Individual)
Historian

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 28 / 2018

Transaction ID : VTQZWHKJD17

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

C. Peters, Justin, , ,

Mailing Address 1628 Bellevue Ave

Apt 105

City
Seattle

State
WA

Zip Code
98122-0097

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
The Northwest School

Occupation (for Individual)
Educator

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 14 / 2018

Transaction ID : VTQZWHKJ7G2

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

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

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

70.00

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

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

FOR LINE NUMBER: PAGE 51 OF 203

(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Pullman, Aubrey, , ,

Mailing Address 2037 S Washington St

City
Seattle

State
WA

Zip Code
98144-2212

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Amazon

Occupation (for Individual)

Artist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

12 / 07 / 2018

Transaction ID : VTQZWHKJ1W4

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

B. Reed, Kristin, , ,

Mailing Address 681 47th Ave

City

San Francisco

State

CA

Zip Code

94121-2440

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 ▼

387.00

Date of Receipt

12 / 14 / 2018

Transaction ID : VTQZWHKJ3A6

Amount of Each Receipt this Period

27.00

☐ Memo Item

Non-Contribution Account

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

C. Repko, Susan, , ,

Mailing Address 44 Worster Rd

City

Eliot

State

ME

Zip Code

03903-1113

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Phillips Exeter Academy

Occupation (for Individual)

Teacher/Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 30 / 2018

Transaction ID : VTQZWHKHGH1

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

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

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

97.00

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

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

FOR LINE NUMBER: PAGE 52 OF 203

(check only one)

<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)

ColorOfChange PAC

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

A. Repko, Susan, , ,

Mailing Address 44 Worster Rd

City
EliotState
MEZip Code
03903-1113FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Phillips Exeter AcademyOccupation (for Individual)
Teacher/Writer

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
12	/	28	/	2018

Transaction ID : VTQZWHKJD32

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

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

B. Robb, Don, , ,

Mailing Address 3265 Indian Walk

City

Mechanicsville

State

PA

Zip Code

18934-9522

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NoneOccupation (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
12	/	07	/	2018

Transaction ID : VTQZWHKH48

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

C. Rosenblum, Ruth, , ,

Mailing Address 71 Cassilis Ave

City

Bronxville

State

NY

Zip Code

10708-1204

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
Psychotherapist

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
12	/	14	/	2018

Transaction ID : VTQZWHKJ2H0

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

55.00

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 53 OF 203

(check only one)

<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)

ColorOfChange PAC

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

A. Rubin, Todd, , ,

Mailing Address 201 Santa Monica Blvd
Ste 480

City
Santa Monica

State
CA

Zip Code
90401-2266

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 / 30 / 2018

Transaction ID : VTQZWHKHRP8

Amount of Each Receipt this Period

15.00

☐ Memo Item

Non-Contribution Account

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

B. Rubin, Todd, , ,

Mailing Address 201 Santa Monica Blvd
Ste 480

City
Santa Monica

State
CA

Zip Code
90401-2266

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 07 / 2018

Transaction ID : VTQZWHKH03

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

C. Rubin, Todd, , ,

Mailing Address 201 Santa Monica Blvd
Ste 480

City
Santa Monica

State
CA

Zip Code
90401-2266

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 14 / 2018

Transaction ID : VTQZWHKJ4K0

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

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

65.00

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 203
(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Rubin, Todd, , ,

Mailing Address 201 Santa Monica Blvd
Ste 480

City
Santa Monica

State
CA

Zip Code
90401-2266

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

12 / 21 / 2018

Transaction ID : VTQZWHKJ832

Amount of Each Receipt this Period

15.00

☐ Memo Item

Non-Contribution Account

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

B. Rupp, Joseph, , ,

Mailing Address 1421 Olive St

City

Indianapolis

State

IN

Zip Code

46203-1929

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Equifax

Occupation (for Individual)

Software Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

11 / 30 / 2018

Transaction ID : VTQZWHKHTX7

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

C. Rupp, Joseph, , ,

Mailing Address 1421 Olive St

City

Indianapolis

State

IN

Zip Code

46203-1929

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Equifax

Occupation (for Individual)

Software Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

12 / 28 / 2018

Transaction ID : VTQZWHKJCS3

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

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

65.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 55 OF 203

(check only one)

<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)

ColorOfChange PAC

A. Ryan, James, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 119 Commonwealth Ave Apt 5 City Boston State MA Zip Code 02116-2338 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Medstro Occupation (for Individual) COO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 550.00			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 30 / 2018 Transaction ID : VTQZWHKHRD7 Amount of Each Receipt this Period 50.00 <input type="checkbox"/> Memo Item Non-Contribution Account
B. Schoenbach, Ruth, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 134 Parnassus Ave City San Francisco State CA Zip Code 94117-4213 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) WestEd Occupation (for Individual) Project Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1197.00			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 30 / 2018 Transaction ID : VTQZWHKHM55 Amount of Each Receipt this Period 25.00 <input type="checkbox"/> Memo Item Non-Contribution Account
C. Schoenbach, Ruth, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 134 Parnassus Ave City San Francisco State CA Zip Code 94117-4213 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) WestEd Occupation (for Individual) Project Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1197.00			Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 28 / 2018 Transaction ID : VTQZWHKJGT1 Amount of Each Receipt this Period 25.00 <input type="checkbox"/> Memo Item Non-Contribution Account
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: PAGE 56 OF 203

(check only one)

<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)

ColorOfChange PAC

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

A. Schwartz, Miriam, , ,

Mailing Address 333 Great River Rd
Apt 409

City
Somerville

State
MA

Zip Code
02145-1222

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 ▼

4500.00

Date of Receipt

11 / 30 / 2018

Transaction ID : VTQZWHKHE86

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

B. Schwartz, Miriam, , ,

Mailing Address 333 Great River Rd
Apt 409

City
Somerville

State
MA

Zip Code
02145-1222

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 ▼

4500.00

Date of Receipt

12 / 21 / 2018

Transaction ID : VTQZWHKJBB2

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

C. Shaw, Toni, , ,

Mailing Address 5307 8th Ave

City
Los Angeles

State
CA

Zip Code
90043-4857

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 ▼

237.00

Date of Receipt

12 / 07 / 2018

Transaction ID : VTQZWHKHXN0

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

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

220.00

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 57 OF 203

(check only one)

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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Sheinfeld, Susan, , ,

Mailing Address 220 Bedford St
Apt 8E

City
Bridgewater

State
MA

Zip Code
02324-3131

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 ▼

295.00

Date of Receipt

11 / 30 / 2018

Transaction ID : VTQZWHKHN16

Amount of Each Receipt this Period

12.00

☐ Memo Item

Non-Contribution Account

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

B. Smith, Janna, , ,

Mailing Address 55 Thompson Ln

City
Milton

State
MA

Zip Code
02186-3255

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Cambridge Health Alliance

Occupation (for Individual)
Social Worker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

11 / 30 / 2018

Transaction ID : VTQZWHKHS64

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

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

C. Smith, Janna, , ,

Mailing Address 55 Thompson Ln

City
Milton

State
MA

Zip Code
02186-3255

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Cambridge Health Alliance

Occupation (for Individual)
Social Worker

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

12 / 21 / 2018

Transaction ID : VTQZWHKJ7S3

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

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

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

52.00

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 203

(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Soffer, Jill, , ,

Mailing Address 561 Spring Park Ranch Rd

City
Carbondale

State
CO

Zip Code
81623-9118

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 ▼

1250.00

Date of Receipt

12 / **14** / **2018**

Transaction ID : VTQZWHKJ4G6

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

B. St. Onge, Betsey, , ,

Mailing Address 182 Lake View Ave

City
Cambridge

State
MA

Zip Code
02138-2132

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-Employed

Occupation (for Individual)
Teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

11 / **30** / **2018**

Transaction ID : VTQZWHKHE78

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

C. St. Onge, Betsey, , ,

Mailing Address 182 Lake View Ave

City
Cambridge

State
MA

Zip Code
02138-2132

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-Employed

Occupation (for Individual)
Teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

12 / **21** / **2018**

Transaction ID : VTQZWHKJBC0

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

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

450.00

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

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

FOR LINE NUMBER: PAGE 59 OF 203
(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Starr, Jane, , ,

Mailing Address 12016 SW Cedarhurst Rd

City
Vashon

State
WA

Zip Code
98070-3514

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

905.00

Date of Receipt

12 / 28 / 2018

Transaction ID : VTQZWHKJFC7

Amount of Each Receipt this Period

5.00

☐ Memo Item

Non-Contribution Account

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

B. Starr, Susan, , ,

Mailing Address 8315 CJ Landing

City
Pinckney

State
MI

Zip Code
48169

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Mrs.

Occupation (for Individual)

Instructor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.00

Date of Receipt

12 / 07 / 2018

Transaction ID : VTQZWHKHYS4

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

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

C. Stern, Gillian, , ,

Mailing Address 26 E 81st St
Apt 5S

City
New York

State
NY

Zip Code
10028-0219

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 ▼

255.00

Date of Receipt

12 / 07 / 2018

Transaction ID : VTQZWHKJ1P7

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

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

35.00

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 203

(check only one)

<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)

ColorOfChange PAC

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

A. Stewart, Nzingha, , ,

Mailing Address 7439 Woodman Ave
Unit 30City
Van NuysState
CAZip Code
91405-1572FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Filmmaker

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
12		07		2018

Transaction ID : VTQZWHKHV76

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

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

B. Stutsman, Rachel, , ,

Mailing Address 625 Bryn Mawr Dr

City
IndianapolisState
INZip Code
46260-4735FEC 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 ▼

330.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2018

Transaction ID : VTQZWHKHK37

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

C. Stutsman, Rachel, , ,

Mailing Address 625 Bryn Mawr Dr

City
IndianapolisState
INZip Code
46260-4735FEC 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 ▼

330.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		28		2018

Transaction ID : VTQZWHKJG39

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

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

120.00

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

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

FOR LINE NUMBER: PAGE 61 OF 203

(check only one)

<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)

ColorOfChange PAC

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

A. Sullivan, Mark, , ,

Mailing Address 2635 Russell St

City
BerkeleyState
CAZip Code
94705-2131FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Psychotherapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		07		2018

Transaction ID : VTQZWHKHVB7

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

B. Sutton, Beth, , ,

Mailing Address 4401 Fairview Rd

City
RenoState
NVZip Code
89511-6524FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Enki Education Inc.Occupation (for Individual)
Educator

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		30		2018

Transaction ID : VTQZWHKHJ10

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

C. Sutton, Beth, , ,

Mailing Address 4401 Fairview Rd

City
RenoState
NVZip Code
89511-6524FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Enki Education Inc.Occupation (for Individual)
Educator

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
12		28		2018

Transaction ID : VTQZWHKJFB9

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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 62 OF 203

(check only one)

<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)

ColorOfChange PAC

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

A. Tamkin, Sandi, , ,

Mailing Address 2633 Lincoln Blvd
833

City
Santa Monica

State
CA

Zip Code
90405-4619

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MASC

Occupation (for Individual)
Non-Profit

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 21 / 2018

Transaction ID : VTQZWHKJ967

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

B. Taylor, Leah, , ,

Mailing Address 3720 SW Bond Ave
Unit 1806

City
Portland

State
OR

Zip Code
97239-4576

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Providence

Occupation (for Individual)
Nurse

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 21 / 2018

Transaction ID : VTQZWHKJ9K0

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

C. Telsey, Nadia, , ,

Mailing Address 1207 W 4th Ave

City
Eugene

State
OR

Zip Code
97402-4503

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 ▼

248.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 30 / 2018

Transaction ID : VTQZWHKHPH3

Amount of Each Receipt this Period

3.00

☐ Memo Item

Non-Contribution Account

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

38.00

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 203

(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Temple, Tamara, , ,

Mailing Address 1585 Dodd Rd
Apt 202

City
Mendota Heights

State
MN

Zip Code
55118-2840

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Reachlocal

Occupation (for Individual)
Software Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / **30** / **2018**

Transaction ID : VTQZWHKHNA8

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

B. Temple, Tamara, , ,

Mailing Address 1585 Dodd Rd
Apt 202

City
Mendota Heights

State
MN

Zip Code
55118-2840

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Reachlocal

Occupation (for Individual)
Software Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

12 / **28** / **2018**

Transaction ID : VTQZWHKJJ34

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

C. Thomas, Allison, , ,

Mailing Address 11444 W Olympic Blvd

City
Los Angeles

State
CA

Zip Code
90064-1549

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self Employed

Occupation (for Individual)
Producer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

315.00

Date of Receipt

11 / **30** / **2018**

Transaction ID : VTQZWHKHE45

Amount of Each Receipt this Period

5.00

☐ Memo Item

Non-Contribution Account

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

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

25.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 64 OF 203

(check only one)

<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)

ColorOfChange PAC

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

A. Thomas, Allison, , ,

Mailing Address 11444 W Olympic Blvd

City

Los Angeles

State

CA

Zip Code

90064-1549

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Producer

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
12	/	07	/	2018

Transaction ID : VTQZWHKJ1H7

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

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

B. Thomas, Allison, , ,

Mailing Address 11444 W Olympic Blvd

City

Los Angeles

State

CA

Zip Code

90064-1549

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Producer

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
12	/	21	/	2018

Transaction ID : VTQZWHKJBE6

Amount of Each Receipt this Period

5.00

☐ Memo Item

Non-Contribution Account

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

C. Thompson, Mark, , ,

Mailing Address 22006 E Lost Lake Rd

City

Snohomish

State

WA

Zip Code

98296-3929

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 ▼

460.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	07	/	2018

Transaction ID : VTQZWHKJ1J5

Amount of Each Receipt this Period

72.00

☐ Memo Item

Non-Contribution Account

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

97.00

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 203

(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Thompson, Megan, , ,

Mailing Address 727 N Capitol Ave
Apt 306

City
Lansing

State
MI

Zip Code
48906-5148

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Michigan State University

Occupation (for Individual)
Data Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 07 / 2018

Transaction ID : VTQZWHKH38

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

B. Tobey, Eugene, , ,

Mailing Address 278 Forts Ferry Rd

City
Latham

State
NY

Zip Code
12110-1209

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 ▼

660.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 30 / 2018

Transaction ID : VTQZWHKHHR9

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

C. Tobey, Eugene, , ,

Mailing Address 278 Forts Ferry Rd

City
Latham

State
NY

Zip Code
12110-1209

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 ▼

660.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 30 / 2018

Transaction ID : VTQZWHKHPV2

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

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

110.00

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

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

FOR LINE NUMBER: PAGE 66 OF 203
(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Tobey, Eugene, , ,

Mailing Address 278 Forts Ferry Rd

City
Latham

State
NY

Zip Code
12110-1209

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 ▼

660.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 28 / 2018

Transaction ID : VTQZWHKJF38

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

B. Updike, Helen, , ,

Mailing Address 10 Mitchell Pl

City
New York

State
NY

Zip Code
10017-1801

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 ▼

2580.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 14 / 2018

Transaction ID : VTQZWHKJ4T5

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

C. Veazey, Liz, , ,

Mailing Address 1145 Park Ave

City
Omaha

State
NE

Zip Code
68105-6970

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self Employed

Occupation (for Individual)
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 07 / 2018

Transaction ID : VTQZWHKJ1D6

Amount of Each Receipt this Period

30.00

☐ Memo Item

Non-Contribution Account

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

90.00

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

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

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

FOR LINE NUMBER: PAGE 67 OF 203

(check only one)

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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Webster, Marilyn, , ,

Mailing Address 679 Whately Rd

City
Conway

State
MA

Zip Code
01341-9771

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Artisan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

341.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 14 / 2018

Transaction ID : VTQZWHKJ398

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

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

B. Weithers, Ester, , ,

Mailing Address 1338 N Gardner St
Apt 2

City
Los Angeles

State
CA

Zip Code
90046-4125

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
20th Century Fox

Occupation (for Individual)
TV Writers

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 14 / 2018

Transaction ID : VTQZWHKJ586

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

C. Welborn, Tes, , ,

Mailing Address 2001 Oak St

City
San Francisco

State
CA

Zip Code
94117-1802

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 ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 30 / 2018

Transaction ID : VTQZWHKHFW5

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

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

145.00

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

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

FOR LINE NUMBER: PAGE 68 OF 203

(check only one)

<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)

ColorOfChange PAC

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

A. Welborn, Tes, , ,

Mailing Address 2001 Oak St

City

San Francisco

State

CA

Zip Code

94117-1802

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

None

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		14		2018

Transaction ID : VTQZWHKJ5H7

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

B. Wheat, Mary, , ,

Mailing Address 2715 12th St

City

Astoria

State

NY

Zip Code

11102-3741

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

None

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		07		2018

Transaction ID : VTQZWHKHXX3

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

C. White, Evan, , ,

Mailing Address 1261 Evergreen St

City

San Diego

State

CA

Zip Code

92106-2567

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

None

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary
☐ Other (specify)

General

Aggregate Year-to-Date ▼

314.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		14		2018

Transaction ID : VTQZWHKJ653

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

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

85.00

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

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

FOR LINE NUMBER: PAGE 69 OF 203
(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Wichner, Sara, , ,

Mailing Address 2113 Ashby Ave

City
Berkeley

State
CA

Zip Code
94705-1802

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Genentech

Occupation (for Individual)
Senior Scientific Researcher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.00

Date of Receipt

11 / 30 / 2018

Transaction ID : VTQZWHKHMW7

Amount of Each Receipt this Period

5.00

☐ Memo Item

Non-Contribution Account

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

B. Wichner, Sara, , ,

Mailing Address 2113 Ashby Ave

City
Berkeley

State
CA

Zip Code
94705-1802

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Genentech

Occupation (for Individual)
Senior Scientific Researcher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.00

Date of Receipt

12 / 14 / 2018

Transaction ID : VTQZWHKJ6Y0

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

C. Wichner, Sara, , ,

Mailing Address 2113 Ashby Ave

City
Berkeley

State
CA

Zip Code
94705-1802

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Genentech

Occupation (for Individual)
Senior Scientific Researcher

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

224.00

Date of Receipt

12 / 28 / 2018

Transaction ID : VTQZWHKJJV2

Amount of Each Receipt this Period

5.00

☐ Memo Item

Non-Contribution Account

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

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

35.00

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 70 OF 203

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Wiggins, Carl, , ,

Mailing Address PO Box 11210

City
Atlanta

State
GA

Zip Code
30310-0210

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GSA

Occupation (for Individual)
Mechanical Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 30 / 2018

Transaction ID : VTQZWHKHS56

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

B. Wiggins, Carl, , ,

Mailing Address PO Box 11210

City
Atlanta

State
GA

Zip Code
30310-0210

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GSA

Occupation (for Individual)
Mechanical Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 21 / 2018

Transaction ID : VTQZWHKJ7T1

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

C. Wiley, Ruth, , ,

Mailing Address 19025 Parkside St

City
Detroit

State
MI

Zip Code
48221-2291

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 30 / 2018

Transaction ID : VTQZWHKHF63

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

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

75.00

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

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

FOR LINE NUMBER: PAGE 71 OF 203

(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Wiley, Ruth, , ,

Mailing Address 19025 Parkside St

City
Detroit

State
MI

Zip Code
48221-2291

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 ▼

300.00

Date of Receipt

12 / **21** / **2018**

Transaction ID : VTQZWHKJ9Z4

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

B. Win Justice

Mailing Address 1536 U St NW

City
Washington

State
DC

Zip Code
20009-3912

FEC ID number of contributing
federal political committee.

C C00672394

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2238789.00

Date of Receipt

12 / **14** / **2018**

Transaction ID : VTQZWHKHD18

Amount of Each Receipt this Period

124608.00

☐ Memo Item

Non-Contribution Account

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

C. Wofsy, Leon, , ,

Mailing Address 3009 Triumph Dr

City
Alameda

State
CA

Zip Code
94501-1151

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

12 / **07** / **2018**

Transaction ID : VTQZWHKJ0K0

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

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

124683.00

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

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

FOR LINE NUMBER: PAGE 72 OF 203

(check only one)

<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)

ColorOfChange PAC

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

A. Woodcock, Charlene, , ,

Mailing Address 2355 Virginia St

City
BerkeleyState
CAZip Code
94709-1315FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		07		2018

Transaction ID : VTQZWHKHYZ2

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

B. Zagrean, Cleopatra, , ,

Mailing Address 10 Ocean Pkwy
Apt C15City
BrooklynState
NYZip Code
11218-1510FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Bloom Court LLCOccupation (for Individual)
Consultant

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
12		07		2018

Transaction ID : VTQZWHKHX79

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

C. Zwick, Gillian, , ,

Mailing Address 3811 N Figueroa St
Apt 30City
Los AngelesState
CAZip Code
90065-3162FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
Costume Designer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1024.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2018

Transaction ID : VTQZWHKHM39

Amount of Each Receipt this Period

4.00

☐ Memo Item

Non-Contribution Account

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

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

54.00

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 73 OF 203

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Zwick, Gillian, , ,

Mailing Address 3811 N Figueroa St
Apt 30

City
Los Angeles

State
CA

Zip Code
90065-3162

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Costume Designer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1024.00

Date of Receipt

12 / 28 / 2018

Transaction ID : VTQZWHKJEE2

Amount of Each Receipt this Period

4.00

☐ Memo Item

Non-Contribution Account

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

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

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

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

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

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

4.00

177626.98

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

PAGE 74 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address PO Box 382110

City
CambridgeState
MAZip Code
02238-2110Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		30		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5K

Amount of Each Disbursement this Period

83.18

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address PO Box 382110

City
CambridgeState
MAZip Code
02238-2110Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		30		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5K

Amount of Each Disbursement this Period

98.39

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address PO Box 382110

City
CambridgeState
MAZip Code
02238-2110Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
12		07		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5K

Amount of Each Disbursement this Period

11.56

Non-Contribution Account

☐ Memo Item

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

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

193.13

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

PAGE 75 OF 203

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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address PO Box 382110

City
CambridgeState
MAZip Code
02238-2110Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

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

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				07				2018					

FEC Identification Number

C

Transaction ID : VTQ0M9W5K

Amount of Each Disbursement this Period

91.80

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address PO Box 382110

City
CambridgeState
MAZip Code
02238-2110Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

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

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				07				2018					

FEC Identification Number

C

Transaction ID : VTQ0M9W5K

Amount of Each Disbursement this Period

15.95

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address PO Box 382110

City
CambridgeState
MAZip Code
02238-2110Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

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

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				14				2018					

FEC Identification Number

C

Transaction ID : VTQ0M9W5K

Amount of Each Disbursement this Period

99.57

Non-Contribution Account

☐ Memo Item

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

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

207.32

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

PAGE 76 OF 203

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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address PO Box 382110

City
CambridgeState
MAZip Code
02238-2110Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		21		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5K

Amount of Each Disbursement this Period

75.87

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address PO Box 382110

City
CambridgeState
MAZip Code
02238-2110Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		28		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5K

Amount of Each Disbursement this Period

108.14

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Amalgamated BankMailing Address 275 7th Ave
FI 8City
New YorkState
NYZip Code
10001-6995Purpose of Disbursement
Bank Fees

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		21		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5N

Amount of Each Disbursement this Period

95.00

Non-Contribution Account

☐ Memo Item

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

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

279.01

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

PAGE 77 OF 203

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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Amalgamated BankMailing Address 275 7th Ave
FI 8City
New YorkState
NYZip Code
10001-6995Purpose of Disbursement
Bank Fees

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			27			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5K

Amount of Each Disbursement this Period

15.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Amazon

Mailing Address 410 Terry Ave N

City
SeattleState
WAZip Code
98109-5210Purpose of Disbursement
PEX Card - Office Supplies, See Payment from 11/5/18

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			30			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5Z.

Amount of Each Disbursement this Period

37.73

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Amazon

Mailing Address 410 Terry Ave N

City
SeattleState
WAZip Code
98109-5210Purpose of Disbursement
PEX Card - Office Supplies, See Payment from 11/5/18

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			08			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W60

Amount of Each Disbursement this Period

67.99

* Non-Contribution Account

☒ Memo Item

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

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

15.00

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

PAGE 78 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Amazon

Mailing Address 410 Terry Ave N

City
SeattleState
WAZip Code
98109-5210Purpose of Disbursement
PEX Card - Office Supplies, See Payment from 11/5/18

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			24			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5Y

Amount of Each Disbursement this Period

14.19

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. American Airlines

Mailing Address 4333 Amon Carter Blvd

City
Fort WorthState
TXZip Code
76155-2664Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			27			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W60z

Amount of Each Disbursement this Period

228.30

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. American Airlines

Mailing Address 4333 Amon Carter Blvd

City
Fort WorthState
TXZip Code
76155-2664Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			27			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W61

Amount of Each Disbursement this Period

442.80

* Non-Contribution Account

☒ Memo Item

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

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

0.00

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

PAGE 79 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. American Airlines

Mailing Address 4333 Amon Carter Blvd

City
Fort WorthState
TXZip Code
76155-2664Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			01			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W61

Amount of Each Disbursement this Period

 317.01

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. American Airlines

Mailing Address 4333 Amon Carter Blvd

City
Fort WorthState
TXZip Code
76155-2664Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			11			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W61

Amount of Each Disbursement this Period

 435.80

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. American Airlines

Mailing Address 4333 Amon Carter Blvd

City
Fort WorthState
TXZip Code
76155-2664Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			14			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W61

Amount of Each Disbursement this Period

 242.60

* Non-Contribution Account

☒ Memo Item

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

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

 0.00

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

PAGE 80 OF 203

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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. American Airlines

Mailing Address 4333 Amon Carter Blvd

City
Fort WorthState
TXZip Code
76155-2664Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
12		14		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W62

Amount of Each Disbursement this Period

1056.49

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. American Airlines

Mailing Address 4333 Amon Carter Blvd

City
Fort WorthState
TXZip Code
76155-2664Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
12		23		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5V1

Amount of Each Disbursement this Period

5.00

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Amtrak

Mailing Address 60 Massachusetts Ave NE

City
WashingtonState
DCZip Code
20002-4285Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
12		09		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W61

Amount of Each Disbursement this Period

315.00

* Non-Contribution Account

☒ Memo Item

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

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

0.00

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

PAGE 81 OF 203

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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Amuzie, Charles, , ,

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		30		2018

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

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

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

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9W5N

Amount of Each Disbursement this Period

2055.42

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Amuzie, Charles, , ,

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
12		15		2018

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

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

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

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9W5N

Amount of Each Disbursement this Period

2235.72

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. AT&T

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
12		04		2018

Mailing Address 32 Avenue Of The Americas

City
New YorkState
NYZip Code
10013-2473Purpose of Disbursement
Voided Payment from 11/6/2018

Candidate Name

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

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

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9W5K

Amount of Each Disbursement this Period

- 1460.54

Non-Contribution Account

☐ Memo Item

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

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

2830.60

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

PAGE 82 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. AT&T

Mailing Address 32 Avenue Of The Americas

City
New YorkState
NYZip Code
10013-2473Purpose of Disbursement
Telecommunication Services

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			04			2018					

FEC Identification Number

C

Transaction ID : VTQ0M9W5M

Amount of Each Disbursement this Period

1460.54

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Beautifully Divine

Mailing Address 2 Independent Dr

City
JacksonvilleState
FLZip Code
32202-5058Purpose of Disbursement
PEX Card - Photography/Art Design, See Payment from 11/5/18

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			03			2018					

FEC Identification Number

C

Transaction ID : VTQ0M9W62C

Amount of Each Disbursement this Period

738.30

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Brown, Scott, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			30			2018					

FEC Identification Number

C

Transaction ID : VTQ0M9W5N

Amount of Each Disbursement this Period

211.52

Non-Contribution Account

☐ Memo Item

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

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

1672.06

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

PAGE 83 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Brown, Scott, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		15		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5P

Amount of Each Disbursement this Period

713.88

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Brown, Scott, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Travel Stipend

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		20		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5N

Amount of Each Disbursement this Period

150.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Cepeida, Mojarro, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		30		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5N

Amount of Each Disbursement this Period

4153.68

Non-Contribution Account

☐ Memo Item

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

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

5017.56

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

PAGE 84 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Cepeida, Mojarro, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
12		15		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5P

Amount of Each Disbursement this Period

3692.16

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Cepeida, Mojarro, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
12		31		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5R

Amount of Each Disbursement this Period

5076.72

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Cepeida, Victoria, , ,Mailing Address 1714 Franklin St
100-136City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Reimbursement - Copies

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
12		20		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5N

Amount of Each Disbursement this Period

150.81

Non-Contribution Account

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

8919.69

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

PAGE 85 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Fedex Office

Mailing Address 300 Lakeside Dr

City
OaklandState
CAZip Code
94612-3534Purpose of Disbursement
Copies

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
12	/	20	/	2018

FEC Identification Number

C

Transaction ID : VTQ0M9W68

Amount of Each Disbursement this Period

150.82

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Cepeida, Victoria, , ,Mailing Address 1714 Franklin St
100-136City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Travel Stipend

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
12	/	20	/	2018

FEC Identification Number

C

Transaction ID : VTQ0M9W68

Amount of Each Disbursement this Period

325.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Chappin, Kwesi, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
11	/	30	/	2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5N

Amount of Each Disbursement this Period

1307.28

Non-Contribution Account

☐ Memo Item

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

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

1632.28

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

PAGE 86 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Chappin, Kwesi, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Travel Stipend

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		04		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5M

Amount of Each Disbursement this Period

150.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Chappin, Kwesi, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Travel Stipend

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		12		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5M

Amount of Each Disbursement this Period

150.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Chappin, Kwesi, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		15		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5P

Amount of Each Disbursement this Period

1960.92

Non-Contribution Account

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

2260.92

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

PAGE 87 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Chappin, Kwesi, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		31		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5R

Amount of Each Disbursement this Period

1525.16

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Collins, Jeffrey, , ,

Mailing Address 166 Athol Ave.

City
WashingtonState
DCZip Code
20009Purpose of Disbursement
Salary

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		30		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5N

Amount of Each Disbursement this Period

356.72

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Collins, Jeffrey, , ,

Mailing Address 166 Athol Ave.

City
WashingtonState
DCZip Code
20009Purpose of Disbursement
Salary

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		15		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5P

Amount of Each Disbursement this Period

509.60

Non-Contribution Account

☐ Memo Item

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

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

2391.48

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

PAGE 88 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Collins, Jeffrey, , ,

Mailing Address 166 Athol Ave.

City
WashingtonState
DCZip Code
20009Purpose of Disbursement
Salary

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
12		31		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5R

Amount of Each Disbursement this Period

560.56

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ColorOfChange.org

Mailing Address 1714 Franklin St
100-136City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Staff Salaries and Benefits

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
11		28		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5T

Amount of Each Disbursement this Period

45552.29

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ColorOfChange.org

Mailing Address 1714 Franklin St
100-136City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Payroll Taxes and Benefits

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
11		30		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5S

Amount of Each Disbursement this Period

5256.47

Non-Contribution Account

☐ Memo Item

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

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

51369.32

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

PAGE 89 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. ColorOfChange.org

Date of Disbursement

M M / D D / Y Y Y Y Y
12 / 12 / 2018

Mailing Address 1714 Franklin St
100-136City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Staff Salaries and Benefits

Candidate Name

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

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9W5T

Amount of Each Disbursement this Period

953.68

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ColorOfChange.org

Date of Disbursement

M M / D D / Y Y Y Y Y
12 / 15 / 2018

Mailing Address 1714 Franklin St
100-136City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Payroll Taxes and Benefits

Candidate Name

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

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9W5S

Amount of Each Disbursement this Period

4801.57

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ColorOfChange.org

Date of Disbursement

M M / D D / Y Y Y Y Y
12 / 21 / 2018

Mailing Address 1714 Franklin St
100-136City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Staff Salaries and Benefits

Candidate Name

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

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9W5V

Amount of Each Disbursement this Period

12839.93

Non-Contribution Account

☐ Memo Item

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

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

18595.18

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

PAGE 90 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. ColorOfChange.org

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		31		2018

Mailing Address 1714 Franklin St
100-136City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Payroll Taxes and Benefits

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : VTQ0M9W5S

Amount of Each Disbursement this Period

4144.52

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Cook, Gary, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		30		2018

Mailing Address 4230 Greenlee Ave

City
CincinnatiState
OHZip Code
45217-1842Purpose of Disbursement
Refund

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : VTQ0M9W5K

Amount of Each Disbursement this Period

1000.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CREDO Conduit

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		12		2018

Mailing Address 1001 N Orange Ave

City
OrlandoState
FLZip Code
32801-1018Purpose of Disbursement
PEX Card - Co-Working Space, See Payment from 11/5/18

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : VTQ0M9W61

Amount of Each Disbursement this Period

240.00

* Non-Contribution Account

☒ Memo Item

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

5144.52

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

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

PAGE 91 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Criss, Clarice, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2018

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Category/
TypeOffice 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:

FEC Identification Number

C

Transaction ID : VTQ0M9W5N

Amount of Each Disbursement this Period

2077.20

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Criss, Clarice, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2018

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Category/
TypeOffice 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:

FEC Identification Number

C

Transaction ID : VTQ0M9W5Q

Amount of Each Disbursement this Period

1154.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CVS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		29		2018

Mailing Address 420 5th Ave

City
New YorkState
NYZip Code
10018-1079Purpose of Disbursement
PEX Card - Office Supplies, See Payment from 11/5/18

Candidate Name

Category/
TypeOffice 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:

FEC Identification Number

C

Transaction ID : VTQ0M9W60

Amount of Each Disbursement this Period

64.47

* Non-Contribution Account

☒ Memo Item

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

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

3231.20

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

PAGE 92 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. CVS

Mailing Address 420 5th Ave

City
New YorkState
NYZip Code
10018-1079Purpose of Disbursement
PEX Card - Office Supplies, See Payment from 11/5/18

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			08			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W60I

Amount of Each Disbursement this Period

131.90

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Dade County Water DepartmentMailing Address 10710 SW 211th St
Ste 207City
Cutler BayState
FLZip Code
33189-2819Purpose of Disbursement
PEX Card - Utilities, See Payment from 11/5/18

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			06			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W60I

Amount of Each Disbursement this Period

217.68

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Dean, Sadie, , ,Mailing Address 1714 Franklin St
Ste 136City
OaklandState
CAZip Code
94612-3409Purpose of Disbursement
Salary

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			30			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5N

Amount of Each Disbursement this Period

1846.40

Non-Contribution Account

☐ Memo Item

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

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

1846.40

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

PAGE 93 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Dean, Sadie, , ,

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			03			2018					

Mailing Address 1714 Franklin St
Ste 136City
OaklandState
CAZip Code
94612-3409Purpose of Disbursement
Reimbursement - Travel, Event Supplies, Lodging

Candidate Name

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

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9W5M

Amount of Each Disbursement this Period

268.78

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Dean, Sadie, , ,

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			04			2018					

Mailing Address 1714 Franklin St
Ste 136City
OaklandState
CAZip Code
94612-3409Purpose of Disbursement
Travel Stipend

Candidate Name

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

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9W5M

Amount of Each Disbursement this Period

200.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Dean, Sadie, , ,

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			15			2018					

Mailing Address 1714 Franklin St
Ste 136City
OaklandState
CAZip Code
94612-3409Purpose of Disbursement
Salary

Candidate Name

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

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9W5C

Amount of Each Disbursement this Period

1817.55

Non-Contribution Account

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

2286.33

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

PAGE 94 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Dean, Sadie, , ,

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				31				2018					

Mailing Address 1714 Franklin St
Ste 136City
OaklandState
CAZip Code
94612-3409Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : VTQ0M9W5R

Amount of Each Disbursement this Period

2408.98

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Delta Airlines

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		1	2	7		2	0	1	8	1	8
11				27				2018					

Mailing Address 1030 Delta Blvd

City
AtlantaState
GAZip Code
30354-1989Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : VTQ0M9W61

Amount of Each Disbursement this Period

408.80

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Delta Airlines

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		1	2	8		2	0	1	8	1	8
11				28				2018					

Mailing Address 1030 Delta Blvd

City
AtlantaState
GAZip Code
30354-1989Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : VTQ0M9W5Z

Amount of Each Disbursement this Period

30.00

* Non-Contribution Account

☒ Memo Item

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

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

2408.98

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

PAGE 95 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Delta Airlines

Mailing Address 1030 Delta Blvd

City
AtlantaState
GAZip Code
30354-1989Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
12		04		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5Z

Amount of Each Disbursement this Period

30.00

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Delta Airlines

Mailing Address 1030 Delta Blvd

City
AtlantaState
GAZip Code
30354-1989Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
12		10		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W61I

Amount of Each Disbursement this Period

374.40

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Dollar TreeMailing Address 1431 Sand Lake Rd
140City
OrlandoState
FLZip Code
32809-7053Purpose of Disbursement
PEX Card - Event Supplies, See Payment from 11/5/18

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
12		07		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W60

Amount of Each Disbursement this Period

65.72

* Non-Contribution Account

☒ Memo Item

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

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

0.00

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

PAGE 96 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Dollar TreeMailing Address 1431 Sand Lake Rd
140City
OrlandoState
FLZip Code
32809-7053Purpose of Disbursement
PEX Card - Event Supplies, See Payment from 11/5/18

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		08		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5X

Amount of Each Disbursement this Period

13.78

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Dollar TreeMailing Address 1431 Sand Lake Rd
140City
OrlandoState
FLZip Code
32809-7053Purpose of Disbursement
PEX Card - Event Supplies, See Payment from 11/5/18

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		08		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5Y!

Amount of Each Disbursement this Period

15.90

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Doubletree Orlando Downtown

Mailing Address 5708 Major Blvd

City
OrlandoState
FLZip Code
32819-7904Purpose of Disbursement
PEX Card - Lodging, See Payment from 11/5/18

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		17		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W61

Amount of Each Disbursement this Period

280.74

* Non-Contribution Account

☒ Memo Item

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

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

0.00

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

PAGE 97 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Edwards, Jennifer, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		3	0			2	0	1	8		

FEC Identification Number

C

Transaction ID : VTQ0M9W5N

Amount of Each Disbursement this Period

846.08

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Edwards, Jennifer, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Per Diem, Pre-Determined Daily Rate; Not a Reimbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			0	3			2	0	1	8		

FEC Identification Number

C

Transaction ID : VTQ0M9W5K

Amount of Each Disbursement this Period

550.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Edwards, Jennifer, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			1	5			2	0	1	8		

FEC Identification Number

C

Transaction ID : VTQ0M9W5C

Amount of Each Disbursement this Period

1322.00

Non-Contribution Account

☐ Memo Item

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

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

2718.08

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

PAGE 98 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Edwards, Jennifer, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			31			2018					

FEC Identification Number

C

Transaction ID : VTQ0M9W5R

Amount of Each Disbursement this Period

475.92

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Egencia

Mailing Address 3150 139th Ave SE

City
BellevueState
WAZip Code
98005-4046Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			29			2018					

FEC Identification Number

C

Transaction ID : VTQ0M9W61

Amount of Each Disbursement this Period

332.64

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. EventBrite

Mailing Address 155 5th St

City
San FranciscoState
CAZip Code
94103-2919Purpose of Disbursement
PEX Card - Event Tickets, See Payment from 11/5/18

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			19			2018					

FEC Identification Number

C

Transaction ID : VTQ0M9W61

Amount of Each Disbursement this Period

260.64

* Non-Contribution Account

☒ Memo Item

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

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

475.92

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

PAGE 99 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Expedia

Mailing Address 3150 139th Ave SE

City
BellevueState
WAZip Code
98005-4046Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			11			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5W

Amount of Each Disbursement this Period

5.77

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Expedia

Mailing Address 3150 139th Ave SE

City
BellevueState
WAZip Code
98005-4046Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			11			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W60

Amount of Each Disbursement this Period

126.52

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. ExxonMobil

Mailing Address 225 NE 28th Ave

City
OcalaState
FLZip Code
34470-1270Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			03			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5Z

Amount of Each Disbursement this Period

25.75

* Non-Contribution Account

☒ Memo Item

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

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 100 OF 203

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. ExxonMobil

Mailing Address 225 NE 28th Ave

City
Ocala

State
FL

Zip Code
34470-1270

Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 30 / 2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5V

Amount of Each Disbursement this Period

5.00

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Facebook

Mailing Address 1 Hacker Way

City
Menlo Park

State
CA

Zip Code
94025-1456

Purpose of Disbursement
PEX Card - Non-Federal Digital Advertising, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 30 / 2018

FEC Identification Number

C

Transaction ID : VTQ0M9W61f

Amount of Each Disbursement this Period

500.00

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Facebook

Mailing Address 1 Hacker Way

City
Menlo Park

State
CA

Zip Code
94025-1456

Purpose of Disbursement
PEX Card - Non-Federal Digital Advertising, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 14 / 2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5Y

Amount of Each Disbursement this Period

19.98

* Non-Contribution Account

☒ Memo Item

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

0.00

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

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

PAGE 101 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Farmers and Distillers

Mailing Address 600 Massachusetts Ave NW

City
WashingtonState
DCZip Code
20001-5358Purpose of Disbursement
Food/Beverage

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			29			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5C

Amount of Each Disbursement this Period

304.10

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Farmers and Distillers

Mailing Address 600 Massachusetts Ave NW

City
WashingtonState
DCZip Code
20001-5358Purpose of Disbursement
PEX Card - Food/Beverage, See Payment from 11/5/18

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			07			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W61

Amount of Each Disbursement this Period

378.30

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Farmers and Distillers

Mailing Address 600 Massachusetts Ave NW

City
WashingtonState
DCZip Code
20001-5358Purpose of Disbursement
PEX Card - Food/Beverage, See Payment from 11/5/18

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			07			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W61

Amount of Each Disbursement this Period

687.00

* Non-Contribution Account

☒ Memo Item

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

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

304.10

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

PAGE 102 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Fedex Office

Mailing Address 300 Lakeside Dr

City
OaklandState
CAZip Code
94612-3534Purpose of Disbursement
PEX Card - Copies, See Payment from 11/5/18

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		02		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5X

Amount of Each Disbursement this Period

11.11

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Fedex Office

Mailing Address 300 Lakeside Dr

City
OaklandState
CAZip Code
94612-3534Purpose of Disbursement
PEX Card - Copies, See Payment from 11/5/18

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		02		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W60C

Amount of Each Disbursement this Period

100.32

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Fedex Office

Mailing Address 300 Lakeside Dr

City
OaklandState
CAZip Code
94612-3534Purpose of Disbursement
PEX Card - Shipping, See Payment from 11/5/18

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		04		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W61

Amount of Each Disbursement this Period

613.74

* Non-Contribution Account

☒ Memo Item

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

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

0.00

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

PAGE 103 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Fedex Office

Mailing Address 300 Lakeside Dr

City
OaklandState
CAZip Code
94612-3534Purpose of Disbursement
PEX Card - Shipping, See Payment from 11/5/18

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
12	/	04	/	2018

FEC Identification Number

C

Transaction ID : VTQ0M9W61

Amount of Each Disbursement this Period

733.49

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Fedex Office

Mailing Address 300 Lakeside Dr

City
OaklandState
CAZip Code
94612-3534Purpose of Disbursement
PEX Card - Copies, See Payment from 11/5/18

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
12	/	06	/	2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5YI

Amount of Each Disbursement this Period

20.22

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Fedex Office

Mailing Address 300 Lakeside Dr

City
OaklandState
CAZip Code
94612-3534Purpose of Disbursement
PEX Card - Copies, See Payment from 11/5/18

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
12	/	06	/	2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5Z

Amount of Each Disbursement this Period

41.39

* Non-Contribution Account

☒ Memo Item

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

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

0.00

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

PAGE 104 OF 203

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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Fedex Office

Mailing Address 300 Lakeside Dr

City
OaklandState
CAZip Code
94612-3534Purpose of Disbursement
PEX Card - Copies, See Payment from 11/5/18

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			16			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5Z

Amount of Each Disbursement this Period

43.45

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Fedex Office

Mailing Address 300 Lakeside Dr

City
OaklandState
CAZip Code
94612-3534Purpose of Disbursement
PEX Card - Copies, See Payment from 11/5/18

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			18			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5Z

Amount of Each Disbursement this Period

43.88

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Fedex Office

Mailing Address 300 Lakeside Dr

City
OaklandState
CAZip Code
94612-3534Purpose of Disbursement
PEX Card - Shipping, See Payment from 11/5/18

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			18			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W60

Amount of Each Disbursement this Period

146.05

* Non-Contribution Account

☒ Memo Item

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

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

0.00

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

PAGE 105 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Fedex Office

Mailing Address 300 Lakeside Dr

City
OaklandState
CAZip Code
94612-3534Purpose of Disbursement
PEX Card - Shipping, See Payment from 11/5/18

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			25			2018					

FEC Identification Number

C

Transaction ID : VTQ0M9W61.

Amount of Each Disbursement this Period

 420.43

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Fedex Office

Mailing Address 300 Lakeside Dr

City
OaklandState
CAZip Code
94612-3534Purpose of Disbursement
PEX Card - Shipping, See Payment from 11/5/18

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			31			2018					

FEC Identification Number

C

Transaction ID : VTQ0M9W611

Amount of Each Disbursement this Period

 592.89

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Fenton CommunicationMailing Address 630 9th Ave
Ste 910City
New YorkState
NYZip Code
10036-3745Purpose of Disbursement
Communication Consulting Services

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			03			2018					

FEC Identification Number

C

Transaction ID : VTQ0M9W5K

Amount of Each Disbursement this Period

 5010.00

Non-Contribution Account

☐ Memo Item

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

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

 5010.00

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

PAGE 106 OF 203

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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Fenton CommunicationMailing Address 630 9th Ave
Ste 910City
New YorkState
NYZip Code
10036-3745Purpose of Disbursement
Communications Consulting Services

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
12		03		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5K

Amount of Each Disbursement this Period

 4897.27

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Fenton CommunicationMailing Address 630 9th Ave
Ste 910City
New YorkState
NYZip Code
10036-3745Purpose of Disbursement
Communication Consulting Services

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
12		07		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5M

Amount of Each Disbursement this Period

 1375.31

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Fenton CommunicationMailing Address 630 9th Ave
Ste 910City
New YorkState
NYZip Code
10036-3745Purpose of Disbursement
Communication Consulting Services

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
12		12		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5N

Amount of Each Disbursement this Period

 20000.00

Non-Contribution Account

☐ Memo Item

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

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

26272.58

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

PAGE 107 OF 203

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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Fenton CommunicationMailing Address 630 9th Ave
Ste 910City
New YorkState
NYZip Code
10036-3745Purpose of Disbursement
Communication Consulting Services

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			12			2018					

FEC Identification Number

C

Transaction ID : VTQ0M9W5M

Amount of Each Disbursement this Period

3581.25

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Fortin, Candice, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			30			2018					

FEC Identification Number

C

Transaction ID : VTQ0M9W5P1

Amount of Each Disbursement this Period

969.08

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Fortin, Candice, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Travel Stipend

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			04			2018					

FEC Identification Number

C

Transaction ID : VTQ0M9W5N

Amount of Each Disbursement this Period

200.00

Non-Contribution Account

☐ Memo Item

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

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

4750.33

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

PAGE 108 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Fortin, Candice, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Reimbursement - Travel

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
12		14		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5N

Amount of Each Disbursement this Period

36.35

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Fortin, Candice, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
12		15		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5Q

Amount of Each Disbursement this Period

2768.80

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Fortin, Candice, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Reimbursement - Food for Event

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
12		20		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5N

Amount of Each Disbursement this Period

86.04

Non-Contribution Account

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

2891.19

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

PAGE 109 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Fortin, Candice, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

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
12			31			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5R

Amount of Each Disbursement this Period

3270.65

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Goodman, Keith, , ,Mailing Address 1714 Franklin St
100-136City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Strategic Consulting Services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			20			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5NI

Amount of Each Disbursement this Period

11316.39

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Gregory's

Mailing Address 2510 N Martin L King Jr Blvd

City
LansingState
MIZip Code
48906-3820Purpose of Disbursement
PEX Card - Food/Beverage, See Payment from 11/5/18

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
12			19			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W61

Amount of Each Disbursement this Period

515.50

* Non-Contribution Account

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

14587.04

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

PAGE 110 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Harris, Reginald, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

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

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		30		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5P

Amount of Each Disbursement this Period

2215.04

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Harris, Reginald, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Travel Stipend

Candidate Name

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

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		04		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5M

Amount of Each Disbursement this Period

200.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Harris, Reginald, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

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

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		15		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5C

Amount of Each Disbursement this Period

2768.80

Non-Contribution Account

☐ Memo Item

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

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

5183.84

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

PAGE 111 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Harris, Reginald, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		31		2018

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

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

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9W5R

Amount of Each Disbursement this Period

2491.92

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Hatch, Arisha, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		30		2018

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

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

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9W5P:

Amount of Each Disbursement this Period

2007.36

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Hatch, Arisha, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		15		2018

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

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

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9W5C

Amount of Each Disbursement this Period

2146.59

Non-Contribution Account

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

6645.87

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

PAGE 112 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Hatch, Arisha, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				31				2018					

FEC Identification Number

C

Transaction ID : VTQ0M9W5R

Amount of Each Disbursement this Period

757.62

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Hawk, Ariana, , ,Mailing Address 1714 Franklin St
100-136City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Travel Stipend

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				04				2018					

FEC Identification Number

C

Transaction ID : VTQ0M9W5M

Amount of Each Disbursement this Period

200.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Hawk, Ariana, , ,Mailing Address 1714 Franklin St
100-136City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				15				2018					

FEC Identification Number

C

Transaction ID : VTQ0M9W5C

Amount of Each Disbursement this Period

2230.40

Non-Contribution Account

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

3188.02

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

PAGE 113 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Hawk, Ariana, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2018

Mailing Address 1714 Franklin St
100-136City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

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

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9W5R

Amount of Each Disbursement this Period

2007.36

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Hertz Rent a Car

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		02		2018

Mailing Address PO Box 261200

City
Oklahoma CityState
OKZip Code
73126Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

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

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9W60/

Amount of Each Disbursement this Period

75.80

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Hertz Rent a Car

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		03		2018

Mailing Address PO Box 261200

City
Oklahoma CityState
OKZip Code
73126Purpose of Disbursement
Travel

Candidate Name

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

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9W5N

Amount of Each Disbursement this Period

251.02

Non-Contribution Account

☐ Memo Item

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

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

2258.38

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

PAGE 114 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Hertz Rent a Car

Mailing Address PO Box 261200

City
Oklahoma CityState
OKZip Code
73126Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			22			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W60I

Amount of Each Disbursement this Period

92.88

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Hilton Garden Inn

Mailing Address 815 14th St NW

City
WashingtonState
DCZip Code
20005-3301Purpose of Disbursement
PEX Card - Lodging, See Payment from 11/5/18

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			29			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W61I

Amount of Each Disbursement this Period

344.40

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Hines, Vidal, , ,

Mailing Address 9202 Bluefield Rd

City
SpringdaleState
MDZip Code
20774-5427Purpose of Disbursement
Salary

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			30			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5P

Amount of Each Disbursement this Period

2250.00

Non-Contribution Account

☐ Memo Item

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

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

2250.00

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

PAGE 115 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Hines, Vidal, , ,

Mailing Address 9202 Bluefield Rd

City
SpringdaleState
MDZip Code
20774-5427Purpose of Disbursement
Travel Stipend

Candidate Name

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

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				04				2018					

FEC Identification Number

C

Transaction ID : VTQ0M9W5M

Amount of Each Disbursement this Period

100.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Hines, Vidal, , ,

Mailing Address 9202 Bluefield Rd

City
SpringdaleState
MDZip Code
20774-5427Purpose of Disbursement
Reimbursement - Travel, Lodging

Candidate Name

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

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				12				2018					

FEC Identification Number

C

Transaction ID : VTQ0M9W5N:

Amount of Each Disbursement this Period

899.18

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
Travel

Candidate Name

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

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				12				2018					

FEC Identification Number

C

Transaction ID : VTQ0M9W68

Amount of Each Disbursement this Period

22.33

* Non-Contribution Account

☒ Memo Item

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

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

999.18

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

PAGE 116 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Hines, Vidal, , ,

Mailing Address 9202 Bluefield Rd

City
SpringdaleState
MDZip Code
20774-5427Purpose of Disbursement
Salary

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
12		15		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5Q

Amount of Each Disbursement this Period

1250.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Hines, Vidal, , ,

Mailing Address 9202 Bluefield Rd

City
SpringdaleState
MDZip Code
20774-5427Purpose of Disbursement
Per Diem, Pre-Determined Daily Rate; Not a Reimbursement

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
12		20		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5N

Amount of Each Disbursement this Period

1000.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Hinton, Danita, , ,Mailing Address 1714 Franklin St
Ste 136City
OaklandState
CAZip Code
94612-3409Purpose of Disbursement
Salary

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		30		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5P

Amount of Each Disbursement this Period

475.97

Non-Contribution Account

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

2725.97

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

PAGE 117 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Hinton, Danita, , ,

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				15				2018					

Mailing Address 1714 Franklin St
Ste 136City
OaklandState
CAZip Code
94612-3409Purpose of Disbursement
Salary

Candidate Name

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

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9W5Q

Amount of Each Disbursement this Period

346.16

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Hinton, Danita, , ,

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				31				2018					

Mailing Address 1714 Franklin St
Ste 136City
OaklandState
CAZip Code
94612-3409Purpose of Disbursement
Salary

Candidate Name

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

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9W5R

Amount of Each Disbursement this Period

216.35

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Hotel Monaco

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
11				30				2018					

Mailing Address 2 N Charles St

City
BaltimoreState
MDZip Code
21201-3707Purpose of Disbursement
PEX Card - Lodging, See Payment from 11/5/18

Candidate Name

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

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9W62

Amount of Each Disbursement this Period

1081.08

* Non-Contribution Account

☒ Memo Item

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

562.51

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

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

PAGE 118 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Hotwire

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2018

Mailing Address 655 Montgomery St
Ste 600City
San FranciscoState
CAZip Code
94111-2627Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

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

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9W61

Amount of Each Disbursement this Period

406.44

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. IB5K LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		12		2018

Mailing Address 319 Lafayette St
Unit 195City
New YorkState
NYZip Code
10012-2711Purpose of Disbursement
Web and Mobile Developing

Candidate Name

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

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9W5M

Amount of Each Disbursement this Period

3750.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Instacart

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		05		2018

Mailing Address 50 Beale St
Ste 600City
San FranciscoState
CAZip Code
94105-1871Purpose of Disbursement
PEX Card - Food/Beverage, See Payment from 11/5/18

Candidate Name

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

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9W5Z

Amount of Each Disbursement this Period

23.41

* Non-Contribution Account

☒ Memo Item

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

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

3750.00

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

PAGE 119 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. InstacartMailing Address 50 Beale St
Ste 600City
San FranciscoState
CAZip Code
94105-1871Purpose of Disbursement
PEX Card - Food/Beverage, See Payment from 11/5/18

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
12		16		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W60

Amount of Each Disbursement this Period

62.90

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Irving, Allen, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		30		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5N

Amount of Each Disbursement this Period

2111.76

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Irving, Allen, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Travel Stipend

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
12		04		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5N

Amount of Each Disbursement this Period

100.00

Non-Contribution Account

☐ Memo Item

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

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

2211.76

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

PAGE 120 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Irving, Allen, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		15		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5N

Amount of Each Disbursement this Period

1173.20

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Irving, Allen, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		31		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5N

Amount of Each Disbursement this Period

1290.52

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Jackson, Contessa, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		30		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5P

Amount of Each Disbursement this Period

1730.88

Non-Contribution Account

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

4194.60

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

PAGE 121 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Jackson, Contessa, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Travel Stipend

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		04		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5M

Amount of Each Disbursement this Period

200.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Jackson, Contessa, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		15		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5Q

Amount of Each Disbursement this Period

1923.20

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Jackson, Contessa, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		31		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5R

Amount of Each Disbursement this Period

2115.52

Non-Contribution Account

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

4238.72

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

PAGE 122 OF 203

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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Kith and Kin Washing

Mailing Address 801 Wharf St SW

City
WashingtonState
DCZip Code
20024-3444Purpose of Disbursement
Food/Beverages

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			28			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5B

Amount of Each Disbursement this Period

58.90

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Kith and Kin Washing

Mailing Address 801 Wharf St SW

City
WashingtonState
DCZip Code
20024-3444Purpose of Disbursement
Food/Beverages

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			28			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5B'

Amount of Each Disbursement this Period

242.40

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Lathia, Bhavik, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			30			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5P

Amount of Each Disbursement this Period

2980.34

Non-Contribution Account

☐ Memo Item

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

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

3281.64

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

PAGE 123 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Lathia, Bhavik, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			15			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5Q

Amount of Each Disbursement this Period

1730.52

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Lathia, Bhavik, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			31			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5R

Amount of Each Disbursement this Period

576.84

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Leonard, Ashley, , ,

Mailing Address 4103 Saint Clair Pl

City
Temple HillsState
MDZip Code
20748-1629Purpose of Disbursement
Event Planning Services

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			04			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5N

Amount of Each Disbursement this Period

1000.00

Non-Contribution Account

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

3307.36

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

PAGE 124 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Leonard, Ashley, , ,

Mailing Address 4103 Saint Clair Pl

City
Temple HillsState
MDZip Code
20748-1629Purpose of Disbursement
Event Planning Services

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		07		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5M

Amount of Each Disbursement this Period

700.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Leonard, Ashley, , ,

Mailing Address 4103 Saint Clair Pl

City
Temple HillsState
MDZip Code
20748-1629Purpose of Disbursement
Program Writing Consultant

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		20		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5N

Amount of Each Disbursement this Period

1250.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Leonard, Ashley, , ,

Mailing Address 4103 Saint Clair Pl

City
Temple HillsState
MDZip Code
20748-1629Purpose of Disbursement
Program Writing Consultant

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		20		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5N

Amount of Each Disbursement this Period

1000.00

Non-Contribution Account

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

2950.00

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

PAGE 125 OF 203

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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Lewis, Sonya, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		30		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5P

Amount of Each Disbursement this Period

114.88

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Lewis, Sonya, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		15		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5Q

Amount of Each Disbursement this Period

143.60

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		27		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5V

Amount of Each Disbursement this Period

7.69

* Non-Contribution Account

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

258.48

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

PAGE 126 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Lyft

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		27		2018

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Category/
TypeOffice 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:

FEC Identification Number

C

Transaction ID : VTQ0M9W5Y

Amount of Each Disbursement this Period

19.26

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Lyft

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		28		2018

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Category/
TypeOffice 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:

FEC Identification Number

C

Transaction ID : VTQ0M9W5W

Amount of Each Disbursement this Period

7.31

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Lyft

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		28		2018

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Category/
TypeOffice 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:

FEC Identification Number

C

Transaction ID : VTQ0M9W5V

Amount of Each Disbursement this Period

7.31

* Non-Contribution Account

☒ Memo Item

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

0.00

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

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

PAGE 127 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			28			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5X

Amount of Each Disbursement this Period

10.31

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			28			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5X

Amount of Each Disbursement this Period

10.31

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			28			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5X

Amount of Each Disbursement this Period

12.31

* Non-Contribution Account

☒ Memo Item

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

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

0.00

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

PAGE 128 OF 203

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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

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

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			28			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5Y

Amount of Each Disbursement this Period

17.83

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

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

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			28			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5Z

Amount of Each Disbursement this Period

24.97

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

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

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			28			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5Z

Amount of Each Disbursement this Period

46.91

* Non-Contribution Account

☒ Memo Item

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

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

0.00

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

PAGE 129 OF 203

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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			28			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W60:

Amount of Each Disbursement this Period

59.37

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			29			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5V:

Amount of Each Disbursement this Period

2.00

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			30			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5V:

Amount of Each Disbursement this Period

8.40

* Non-Contribution Account

☒ Memo Item

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

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

0.00

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

PAGE 130 OF 203

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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

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

State: District:

Category/
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
11		30		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5X

Amount of Each Disbursement this Period

11.08

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

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

State: District:

Category/
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
12		01		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5XI

Amount of Each Disbursement this Period

11.35

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

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

State: District:

Category/
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
12		01		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5Z

Amount of Each Disbursement this Period

25.50

* Non-Contribution Account

☒ Memo Item

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

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

0.00

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

PAGE 131 OF 203

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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

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

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			02			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5V

Amount of Each Disbursement this Period

2.00

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			02			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5W

Amount of Each Disbursement this Period

7.30

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			02			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5V

Amount of Each Disbursement this Period

7.38

* Non-Contribution Account

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 132 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			02			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5Y

Amount of Each Disbursement this Period

17.43

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			03			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5VI

Amount of Each Disbursement this Period

2.00

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			03			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5V

Amount of Each Disbursement this Period

7.47

* Non-Contribution Account

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 133 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		03		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5W

Amount of Each Disbursement this Period

8.38

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		03		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5X

Amount of Each Disbursement this Period

10.68

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		03		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5X

Amount of Each Disbursement this Period

12.31

* Non-Contribution Account

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 134 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		03		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5X

Amount of Each Disbursement this Period

12.46

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		03		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5YI

Amount of Each Disbursement this Period

14.15

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		03		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5Y

Amount of Each Disbursement this Period

15.80

* Non-Contribution Account

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 135 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		03		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5Y

Amount of Each Disbursement this Period

16.03

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		03		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5Y

Amount of Each Disbursement this Period

20.03

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		03		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5Y

Amount of Each Disbursement this Period

20.69

* Non-Contribution Account

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 136 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
12		03		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5Z

Amount of Each Disbursement this Period

28.87

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
12		04		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5W

Amount of Each Disbursement this Period

7.31

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
12		04		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5V

Amount of Each Disbursement this Period

8.68

* Non-Contribution Account

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 137 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
12		04		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5W

Amount of Each Disbursement this Period

8.75

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
12		04		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5X'

Amount of Each Disbursement this Period

9.86

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
12		04		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5X

Amount of Each Disbursement this Period

10.63

* Non-Contribution Account

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 138 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			04			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5X

Amount of Each Disbursement this Period

10.74

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			05			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5W

Amount of Each Disbursement this Period

7.00

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			05			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5V

Amount of Each Disbursement this Period

7.77

* Non-Contribution Account

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 139 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			06			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5W

Amount of Each Disbursement this Period

7.20

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			06			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5W

Amount of Each Disbursement this Period

8.69

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			06			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5X

Amount of Each Disbursement this Period

11.20

* Non-Contribution Account

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 140 OF 203

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		06		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5X

Amount of Each Disbursement this Period

11.75

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		06		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5Y

Amount of Each Disbursement this Period

15.30

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		06		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5Y

Amount of Each Disbursement this Period

21.21

* Non-Contribution Account

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 141 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			06			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W60

Amount of Each Disbursement this Period

50.50

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			06			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W60

Amount of Each Disbursement this Period

77.97

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			07			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5V

Amount of Each Disbursement this Period

9.15

* Non-Contribution Account

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 142 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
12		07		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5X

Amount of Each Disbursement this Period

9.79

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
12		07		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5Y

Amount of Each Disbursement this Period

21.90

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
12		08		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5X

Amount of Each Disbursement this Period

12.65

* Non-Contribution Account

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 143 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		08		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5Y

Amount of Each Disbursement this Period

18.37

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		08		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5Y

Amount of Each Disbursement this Period

23.26

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		08		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5Z

Amount of Each Disbursement this Period

37.67

* Non-Contribution Account

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 144 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
12	/	09	/	2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5Y

Amount of Each Disbursement this Period

14.71

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
12	/	10	/	2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5W

Amount of Each Disbursement this Period

7.60

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
12	/	10	/	2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5Z

Amount of Each Disbursement this Period

24.89

* Non-Contribution Account

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 145 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		11		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5Z

Amount of Each Disbursement this Period

43.92

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		12		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5V

Amount of Each Disbursement this Period

4.29

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		13		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5X

Amount of Each Disbursement this Period

12.82

* Non-Contribution Account

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 146 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		14		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5V

Amount of Each Disbursement this Period

5.00

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		14		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5W

Amount of Each Disbursement this Period

7.22

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		14		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5X

Amount of Each Disbursement this Period

12.27

* Non-Contribution Account

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 147 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			14			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5X

Amount of Each Disbursement this Period

13.93

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			14			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5YI

Amount of Each Disbursement this Period

16.85

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			14			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5Y

Amount of Each Disbursement this Period

19.75

* Non-Contribution Account

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 148 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		14		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5Z

Amount of Each Disbursement this Period

24.89

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		15		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5Y

Amount of Each Disbursement this Period

14.42

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		16		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5X

Amount of Each Disbursement this Period

11.77

* Non-Contribution Account

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 149 OF 203

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Lyft

Mailing Address 185 Berry St

City
San FranciscoState
CAZip Code
94107-5705Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			20			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5Z

Amount of Each Disbursement this Period

31.61

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Malone, Kortni, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			30			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5P

Amount of Each Disbursement this Period

2077.20

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Malone, Kortni, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Travel Stipend

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			04			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5N

Amount of Each Disbursement this Period

200.00

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

2277.20

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 150 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Malone, Kortni, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			15			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5Q

Amount of Each Disbursement this Period

2308.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Malone, Kortni, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			31			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5R

Amount of Each Disbursement this Period

2077.20

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Malone, Quiana, , ,Mailing Address 1714 Franklin St
100-136City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			30			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5P

Amount of Each Disbursement this Period

2077.20

Non-Contribution Account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6462.40

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 151 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Malone, Quiana, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		12		2018

Mailing Address 1714 Franklin St
100-136City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Travel Stipend

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9W5N

Amount of Each Disbursement this Period

200.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Malone, Quiana, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		15		2018

Mailing Address 1714 Franklin St
100-136City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9W5Q

Amount of Each Disbursement this Period

2308.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Malone, Quiana, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		31		2018

Mailing Address 1714 Franklin St
100-136City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9W5R

Amount of Each Disbursement this Period

2538.80

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

5046.80

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 152 OF 203

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Mansion on O Street

Mailing Address 2020 O St NW

City
WashingtonState
DCZip Code
20036-5912Purpose of Disbursement
PEX Card - Venue Rental, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			22			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W61I

Amount of Each Disbursement this Period

360.00

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Marks, Daniel, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			30			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5P/

Amount of Each Disbursement this Period

951.84

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Marks, Daniel, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Travel Stipend

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			07			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5N

Amount of Each Disbursement this Period

175.00

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1126.84

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 153 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Marks, Daniel, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		15		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5Q

Amount of Each Disbursement this Period

211.52

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Marks, Daniel, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		31		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5R

Amount of Each Disbursement this Period

132.20

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. McKelvey, Daniel, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		30		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5P

Amount of Each Disbursement this Period

2491.92

Non-Contribution Account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2835.64

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 154 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. McKelvey, Daniel, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		15		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5Q

Amount of Each Disbursement this Period

2768.80

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. McKelvey, Daniel, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		31		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5R

Amount of Each Disbursement this Period

2491.92

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. McKinney, Patricia, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		30		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5P

Amount of Each Disbursement this Period

2076.48

Non-Contribution Account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7337.20

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 155 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. McKinney, Patricia, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		15		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5Q

Amount of Each Disbursement this Period

2307.20

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. McKinney, Patricia, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		31		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5R

Amount of Each Disbursement this Period

2537.92

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. McKinney, Patrina, , ,Mailing Address 1714 Franklin St
100-136City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Travel Stipend

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		04		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5N

Amount of Each Disbursement this Period

200.00

Non-Contribution Account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5045.12

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 156 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Morris, Ashton, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			30			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5P

Amount of Each Disbursement this Period

2076.48

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Morris, Ashton, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			15			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5Q

Amount of Each Disbursement this Period

1153.60

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. NGP VAN

Mailing Address 1101 15th St NW

City
WashingtonState
DCZip Code
20005-5006Purpose of Disbursement
Software and Support Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			03			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5K

Amount of Each Disbursement this Period

625.00

Non-Contribution Account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3855.08

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 157 OF 203

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. NGP VAN

Mailing Address 1101 15th St NW

City
WashingtonState
DCZip Code
20005-5006Purpose of Disbursement
Software and Support Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
12		12		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5N

Amount of Each Disbursement this Period

342.78

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Norwood, La'Nae, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
11		30		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5PI

Amount of Each Disbursement this Period

1989.96

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Norwood, La'Nae, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
12		15		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5C

Amount of Each Disbursement this Period

2235.10

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

4567.84

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 158 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Norwood, La'Nae, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		31		2018

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : VTQ0M9W5R

Amount of Each Disbursement this Period

2494.66

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Office Depot

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		29		2018

Mailing Address 3535 Hollis St

City
EmeryvilleState
CAZip Code
94608-4155Purpose of Disbursement
Office Supplies

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : VTQ0M9W5C

Amount of Each Disbursement this Period

36.55

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Olson Hagel & Fishburn, LLP

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		24		2018

Mailing Address 555 Capitol Mall
Ste 400City
SacramentoState
CAZip Code
95814-4503Purpose of Disbursement
Voided Payment from 9/21/2018

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : VTQ0M9W5K

Amount of Each Disbursement this Period

- 1831.80

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

699.41

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 159 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Opa Locka

Mailing Address 490 Opa Locka Blvd

City
Opa LockaState
FLZip Code
33054-3563Purpose of Disbursement
PEX Card - Venue Rental, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			22			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W61I

Amount of Each Disbursement this Period

355.00

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Painting with a Twist

Mailing Address 1525 San Marco Blvd

City
JacksonvilleState
FLZip Code
32207-2905Purpose of Disbursement
PEX Card - Venue Rental, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			14			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W61I

Amount of Each Disbursement this Period

350.00

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Painting with a Twist

Mailing Address 1525 San Marco Blvd

City
JacksonvilleState
FLZip Code
32207-2905Purpose of Disbursement
PEX Card - Venue Rental, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			22			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W61I

Amount of Each Disbursement this Period

485.00

* Non-Contribution Account

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 160 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Petty, Corina, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2018

Mailing Address 150 Preakness Ln

City
VallejoState
CAZip Code
94591-8517Purpose of Disbursement
Salary

Candidate Name

Category/
TypeOffice 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:

FEC Identification Number

C

Transaction ID : VTQ0M9W5P

Amount of Each Disbursement this Period

594.20

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Pizza Hut

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2018

Mailing Address 728 Geary St

City
San FranciscoState
CAZip Code
94109-7302Purpose of Disbursement
PEX Card - Food/Beverage, See Payment from 11/5/18

Candidate Name

Category/
TypeOffice 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:

FEC Identification Number

C

Transaction ID : VTQ0M9W602

Amount of Each Disbursement this Period

57.34

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Powers, Alicia, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2018

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Category/
TypeOffice 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:

FEC Identification Number

C

Transaction ID : VTQ0M9W5P

Amount of Each Disbursement this Period

3692.16

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

4286.36

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 161 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Powers, Alicia, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Travel Stipend

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		04		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5M

Amount of Each Disbursement this Period

200.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Powers, Alicia, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		15		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5Q

Amount of Each Disbursement this Period

4615.20

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Powers, Alicia, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		31		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5R

Amount of Each Disbursement this Period

5076.72

Non-Contribution Account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

9891.92

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 162 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Quality Printers

Mailing Address 301 Kennedy St NW

City
WashingtonState
DCZip Code
20011-6511Purpose of Disbursement
PEX Card - Office Supplies, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			05			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W60I

Amount of Each Disbursement this Period

215.73

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. QuickBase

Mailing Address 2632 Marine Way

City
Mountain ViewState
CAZip Code
94043-1126Purpose of Disbursement
Software

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			20			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5N!

Amount of Each Disbursement this Period

725.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. River Bistro

Mailing Address 8456 Grand River Ave

City
DetroitState
MIZip Code
48204-2234Purpose of Disbursement
PEX Card - Food/Beverage, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			07			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W61

Amount of Each Disbursement this Period

650.00

* Non-Contribution Account

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

725.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 163 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. River Bistro

Mailing Address 8456 Grand River Ave

City
DetroitState
MIZip Code
48204-2234Purpose of Disbursement
PEX Card - Food/Beverage, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			09			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W61'

Amount of Each Disbursement this Period

700.00

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Robinson, Rashad, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			30			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5P.

Amount of Each Disbursement this Period

1307.57

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Ross, Reagan, , ,Mailing Address 1714 Franklin St
Ste 100-136City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			30			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5P

Amount of Each Disbursement this Period

925.40

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

2232.97

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 164 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Ross, Reagan, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		15		2018

Mailing Address 1714 Franklin St
Ste 100-136City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9W5Q

Amount of Each Disbursement this Period

343.72

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Ross, Reagan, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		31		2018

Mailing Address 1714 Franklin St
Ste 100-136City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9W5R

Amount of Each Disbursement this Period

872.52

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Sam's Club

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		06		2018

Mailing Address 2101 SE Simple Savings Dr

City
BentonvilleState
ARZip Code
72712-4304Purpose of Disbursement
PEX Card - Food/Beverage, See Payment from 11/5/18

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9W5Z

Amount of Each Disbursement this Period

33.64

* Non-Contribution Account

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1216.24

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 165 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Sam's Club

Mailing Address 2101 SE Simple Savings Dr

City
BentonvilleState
ARZip Code
72712-4304Purpose of Disbursement
PEX Card - Food/Beverage, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
12		09		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W60I

Amount of Each Disbursement this Period

131.48

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Sam's Club

Mailing Address 2101 SE Simple Savings Dr

City
BentonvilleState
ARZip Code
72712-4304Purpose of Disbursement
PEX Card - Food/Beverage, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
12		21		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W60I

Amount of Each Disbursement this Period

105.29

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Sanders, Dominique, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		30		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5P

Amount of Each Disbursement this Period

2252.83

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

2252.83

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 166 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Sanders, Dominique, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Travel Stipend

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		04		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5M

Amount of Each Disbursement this Period

200.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Sanders, Dominique, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		15		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5Q

Amount of Each Disbursement this Period

2538.40

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Sanders, Dominique, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Travel Stipend

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		20		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5N

Amount of Each Disbursement this Period

85.00

Non-Contribution Account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2823.40

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 167 OF 203

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Sanders, Dominique, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			31			2018					

FEC Identification Number

C

Transaction ID : VTQ0M9W5R

Amount of Each Disbursement this Period

2744.65

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Savadogo, Ismael, , ,Mailing Address 1714 Franklin St
Ste 100-136City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			30			2018					

FEC Identification Number

C

Transaction ID : VTQ0M9W5PI

Amount of Each Disbursement this Period

1492.74

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Savadogo, Ismael, , ,Mailing Address 1714 Franklin St
Ste 100-136City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			15			2018					

FEC Identification Number

C

Transaction ID : VTQ0M9W5C

Amount of Each Disbursement this Period

1161.02

Non-Contribution Account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5398.41

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 168 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Savadogo, Ismael, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2018

Mailing Address 1714 Franklin St
Ste 100-136City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9W5R

Amount of Each Disbursement this Period

414.65

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Scott, Charles, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2018

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9W5Q

Amount of Each Disbursement this Period

60.09

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Scott, Charles, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2018

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9W5R

Amount of Each Disbursement this Period

60.09

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

534.83

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 169 OF 203

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Shabazz, Rashid, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5P

Amount of Each Disbursement this Period

360.55

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Shabazz, Rashid, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5Q

Amount of Each Disbursement this Period

288.44

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Shabazz, Rashid, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5R

Amount of Each Disbursement this Period

288.44

Non-Contribution Account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

937.43

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 170 OF 203

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Shell Oil

Mailing Address 4900 Wisconsin Ave NW

City
WashingtonState
DCZip Code
20016-4104Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
12		17		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5Z

Amount of Each Disbursement this Period

25.00

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Shell Oil

Mailing Address 4900 Wisconsin Ave NW

City
WashingtonState
DCZip Code
20016-4104Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
12		17		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W60C

Amount of Each Disbursement this Period

50.00

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Sheraton Inner Harbor

Mailing Address 300 S Charles St

City
BaltimoreState
MDZip Code
21201-2405Purpose of Disbursement
PEX Card - Lodging, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
12		02		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W60

Amount of Each Disbursement this Period

191.73

* Non-Contribution Account

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 171 OF 203

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Sheraton Inner Harbor

Mailing Address 300 S Charles St

City
BaltimoreState
MDZip Code
21201-2405Purpose of Disbursement
PEX Card - Lodging, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		03		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W60I

Amount of Each Disbursement this Period

128.35

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Sheraton Inner Harbor

Mailing Address 300 S Charles St

City
BaltimoreState
MDZip Code
21201-2405Purpose of Disbursement
PEX Card - Lodging, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		03		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W61f

Amount of Each Disbursement this Period

401.95

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Sheraton Inner Harbor

Mailing Address 300 S Charles St

City
BaltimoreState
MDZip Code
21201-2405Purpose of Disbursement
PEX Card - Lodging, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		03		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W61

Amount of Each Disbursement this Period

493.20

* Non-Contribution Account

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 172 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Sheraton Inner Harbor

Mailing Address 300 S Charles St

City
BaltimoreState
MDZip Code
21201-2405Purpose of Disbursement
PEX Card - Venue Rental and Catering, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
12		20		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W62

Amount of Each Disbursement this Period

5038.98

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Sorrells, Angie, , ,Mailing Address 1714 Franklin St
100-136City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		30		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5PI

Amount of Each Disbursement this Period

2077.20

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Sorrells, Angie, , ,Mailing Address 1714 Franklin St
100-136City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
12		15		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5C

Amount of Each Disbursement this Period

1154.00

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

3231.20

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 173 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Southwest Airlines

Mailing Address 2702 Love Field Dr

City
DallasState
TXZip Code
75235-1908Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			27			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W60I

Amount of Each Disbursement this Period

95.00

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Southwest Airlines

Mailing Address 2702 Love Field Dr

City
DallasState
TXZip Code
75235-1908Purpose of Disbursement
PEX Card - Food/Beverage, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			27			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W61I

Amount of Each Disbursement this Period

305.98

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Southwest Airlines

Mailing Address 2702 Love Field Dr

City
DallasState
TXZip Code
75235-1908Purpose of Disbursement
Travel

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			03			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5K

Amount of Each Disbursement this Period

620.58

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

620.58

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 174 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Southwest Airlines

Mailing Address 2702 Love Field Dr

City
DallasState
TXZip Code
75235-1908Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		05		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5V.

Amount of Each Disbursement this Period

5.00

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Southwest Airlines

Mailing Address 2702 Love Field Dr

City
DallasState
TXZip Code
75235-1908Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		30		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5X.

Amount of Each Disbursement this Period

12.31

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Southwest Airlines

Mailing Address 2702 Love Field Dr

City
DallasState
TXZip Code
75235-1908Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		31		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W60

Amount of Each Disbursement this Period

199.00

* Non-Contribution Account

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 175 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Spirit Airlines

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
12		11		2018

Mailing Address 2800 Executive Way

City
MiramarState
FLZip Code
33025-6542Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Category/
TypeOffice 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:

FEC Identification Number

C

Transaction ID : VTQ0M9W60

Amount of Each Disbursement this Period

221.19

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Stanton, Chad, , ,

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		30		2018

Mailing Address 1662 K St NE
Apt 2City
WashingtonState
DCZip Code
20002-7616Purpose of Disbursement
Salary

Candidate Name

Category/
TypeOffice 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:

FEC Identification Number

C

Transaction ID : VTQ0M9W5P

Amount of Each Disbursement this Period

245.60

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Stanton, Chad, , ,

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
12		15		2018

Mailing Address 1662 K St NE
Apt 2City
WashingtonState
DCZip Code
20002-7616Purpose of Disbursement
Salary

Candidate Name

Category/
TypeOffice 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:

FEC Identification Number

C

Transaction ID : VTQ0M9W5C

Amount of Each Disbursement this Period

552.60

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

798.20

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 176 OF 203

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Stanton, Chad, , ,Mailing Address 1662 K St NE
Apt 2City
WashingtonState
DCZip Code
20002-7616Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			31			2018			

FEC Identification Number

C Transaction ID : VTQ0M9W5R

Amount of Each Disbursement this Period

614.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Starbucks

Mailing Address 801 Broadway

City
OaklandState
CAZip Code
94607-4015Purpose of Disbursement
PEX Card - Food/Beverage, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			27			2018			

FEC Identification Number

C Transaction ID : VTQ0M9W5W

Amount of Each Disbursement this Period

5.17

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Starbucks

Mailing Address 801 Broadway

City
OaklandState
CAZip Code
94607-4015Purpose of Disbursement
PEX Card - Food/Beverage, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			29			2018			

FEC Identification Number

C Transaction ID : VTQ0M9W5Y

Amount of Each Disbursement this Period

18.65

* Non-Contribution Account

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

614.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 177 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Station Holdco LLC

Mailing Address 4949 N Rancho Dr

City
Las VegasState
NVZip Code
89130-3505Purpose of Disbursement
Voided Payment from 6/12/2018

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
12		27		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5K

Amount of Each Disbursement this Period

- 6058.11

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Talbert, Shannon, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		30		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5PI

Amount of Each Disbursement this Period

2540.16

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Talbert, Shannon, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
12		15		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5C

Amount of Each Disbursement this Period

2116.80

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

- 1401.15

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 178 OF 203

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Talbert, Shannon, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		31		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5R

Amount of Each Disbursement this Period

2163.84

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TC's World Famous RibsMailing Address 3655 S Durango Dr
Ste 18City
Las VegasState
NVZip Code
89147-4106Purpose of Disbursement
PEX Card - Food/Beverage, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		19		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W61

Amount of Each Disbursement this Period

454.32

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. The Brewers Art

Mailing Address 1106 N Charles St

City
BaltimoreState
MDZip Code
21201-5557Purpose of Disbursement
PEC Card - Catering, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		02		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5Z

Amount of Each Disbursement this Period

40.00

* Non-Contribution Account

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

2163.84

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 179 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. The Brewers Art

Mailing Address 1106 N Charles St

City
BaltimoreState
MDZip Code
21201-5557Purpose of Disbursement
PEC Card - Catering, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			02			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5Z

Amount of Each Disbursement this Period

40.00

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. The Brewers Art

Mailing Address 1106 N Charles St

City
BaltimoreState
MDZip Code
21201-5557Purpose of Disbursement
PEC Card - Catering, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			02			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5Z

Amount of Each Disbursement this Period

40.00

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. The Brewers Art

Mailing Address 1106 N Charles St

City
BaltimoreState
MDZip Code
21201-5557Purpose of Disbursement
PEC Card - Catering, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			02			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W62

Amount of Each Disbursement this Period

1124.00

* Non-Contribution Account

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 180 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. The Confidante

Mailing Address 4041 Collins Ave

City
Miami BeachState
FLZip Code
33140-3713Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
12		23		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5Z

Amount of Each Disbursement this Period

45.00

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. The Confidante

Mailing Address 4041 Collins Ave

City
Miami BeachState
FLZip Code
33140-3713Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
12		23		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W60F

Amount of Each Disbursement this Period

185.60

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. The Movement Cooperative

Mailing Address 200 Schermerhorn St

City
BrooklynState
NYZip Code
11201-5889Purpose of Disbursement
Strategic Consulting Management

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
12		07		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5N

Amount of Each Disbursement this Period

25500.00

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

25500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 181 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. The Westin

Mailing Address 1400 M St NW

City
WashingtonState
DCZip Code
20005-2704Purpose of Disbursement
PEX Card - Venue Rental and Catering, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
12	/	19	/	2018

FEC Identification Number

C

Transaction ID : VTQ0M9W62!

Amount of Each Disbursement this Period

23135.09

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Torrisi, Jessie, , ,

Mailing Address 104 San Saba St

City
AustinState
TXZip Code
78702-4732Purpose of Disbursement
Campaign Consulting Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
12	/	24	/	2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5N.

Amount of Each Disbursement this Period

712.50

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Toskr, Inc.Mailing Address 1330 Broadway
FI 3City
OaklandState
CAZip Code
94612-2503Purpose of Disbursement
Non-Federal Digital Communications

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
12	/	03	/	2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5N

Amount of Each Disbursement this Period

1320.25

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

2032.75

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 182 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Toskr, Inc.Mailing Address 1330 Broadway
FI 3City
OaklandState
CAZip Code
94612-2503Purpose of Disbursement
Non-Federal Digital Communications

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			12			2018					

FEC Identification Number

C

Transaction ID : VTQ0M9W5N

Amount of Each Disbursement this Period

5829.10

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Tramel, Alecia, M, ,

Mailing Address 19202 NW 34th Ct

City
Opa LockaState
FLZip Code
33056-2204Purpose of Disbursement
Event Planning Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			20			2018					

FEC Identification Number

C

Transaction ID : VTQ0M9W5N

Amount of Each Disbursement this Period

351.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Travel Insurance Policy

Mailing Address 3300 Business Park Dr

City
Stevens PointState
WIZip Code
54482-8851Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			14			2018					

FEC Identification Number

C

Transaction ID : VTQ0M9W5Y

Amount of Each Disbursement this Period

22.75

* Non-Contribution Account

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

6180.10

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 183 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Travel Insurance Policy

Mailing Address 3300 Business Park Dr

City
Stevens PointState
WIZip Code
54482-8851Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5Y

Amount of Each Disbursement this Period

15.00

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Travel Insurance Policy

Mailing Address 3300 Business Park Dr

City
Stevens PointState
WIZip Code
54482-8851Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5Z

Amount of Each Disbursement this Period

48.00

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		27		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5V

Amount of Each Disbursement this Period

2.00

* Non-Contribution Account

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 184 OF 203

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			27			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5W

Amount of Each Disbursement this Period

5.00

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Food Delivery, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			27			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5W

Amount of Each Disbursement this Period

6.00

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			27			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5X

Amount of Each Disbursement this Period

12.14

* Non-Contribution Account

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 185 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Food Delivery, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			27			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5Y:

Amount of Each Disbursement this Period

14.44

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			27			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5Z:

Amount of Each Disbursement this Period

30.77

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			28			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5V:

Amount of Each Disbursement this Period

1.00

* Non-Contribution Account

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 186 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			28			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5V

Amount of Each Disbursement this Period

1.00

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			28			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5V

Amount of Each Disbursement this Period

1.00

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			28			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5V

Amount of Each Disbursement this Period

7.67

* Non-Contribution Account

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 187 OF 203

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			28			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5W

Amount of Each Disbursement this Period

8.17

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			28			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5W

Amount of Each Disbursement this Period

8.28

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			28			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5W

Amount of Each Disbursement this Period

8.60

* Non-Contribution Account

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 188 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			28			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5W

Amount of Each Disbursement this Period

9.32

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			28			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5X

Amount of Each Disbursement this Period

10.28

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			28			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5X

Amount of Each Disbursement this Period

13.85

* Non-Contribution Account

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 189 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			28			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5Y

Amount of Each Disbursement this Period

14.53

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			28			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5Y

Amount of Each Disbursement this Period

16.27

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			28			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5Y

Amount of Each Disbursement this Period

19.08

* Non-Contribution Account

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 190 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			29			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5Y

Amount of Each Disbursement this Period

16.62

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Food Delivery, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			29			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5Z

Amount of Each Disbursement this Period

44.96

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			30			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5X

Amount of Each Disbursement this Period

10.70

* Non-Contribution Account

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 191 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Food Delivery, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			30			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5X

Amount of Each Disbursement this Period

12.49

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			30			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5Y

Amount of Each Disbursement this Period

16.38

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			30			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5Z

Amount of Each Disbursement this Period

47.54

* Non-Contribution Account

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 192 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			0	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : VTQ0M9W5V

Amount of Each Disbursement this Period

3.00

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			0	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : VTQ0M9W5W

Amount of Each Disbursement this Period

8.11

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			0	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : VTQ0M9W5V

Amount of Each Disbursement this Period

8.35

* Non-Contribution Account

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 193 OF 203

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			0	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : VTQ0M9W5X

Amount of Each Disbursement this Period

10.80

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			0	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : VTQ0M9W60I

Amount of Each Disbursement this Period

82.33

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			0	2			2	0	1	8		

FEC Identification Number

C

Transaction ID : VTQ0M9W5V

Amount of Each Disbursement this Period

2.00

* Non-Contribution Account

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 194 OF 203

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
12		02		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5W

Amount of Each Disbursement this Period

7.88

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
12		02		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5X!

Amount of Each Disbursement this Period

10.40

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
12		02		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5X

Amount of Each Disbursement this Period

10.57

* Non-Contribution Account

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 195 OF 203

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			02			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W60I

Amount of Each Disbursement this Period

80.40

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			03			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5VI

Amount of Each Disbursement this Period

1.00

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			03			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5V

Amount of Each Disbursement this Period

8.43

* Non-Contribution Account

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 196 OF 203

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			03			2018					

FEC Identification Number

C

Transaction ID : VTQ0M9W5Y

Amount of Each Disbursement this Period

21.88

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Food Delivery, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			03			2018					

FEC Identification Number

C

Transaction ID : VTQ0M9W5Z

Amount of Each Disbursement this Period

35.88

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			03			2018					

FEC Identification Number

C

Transaction ID : VTQ0M9W5Z

Amount of Each Disbursement this Period

38.61

* Non-Contribution Account

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 197 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				03				2018					

FEC Identification Number

C

Transaction ID : VTQ0M9W60!

Amount of Each Disbursement this Period

73.66

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				05				2018					

FEC Identification Number

C

Transaction ID : VTQ0M9W5Z!

Amount of Each Disbursement this Period

27.99

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				05				2018					

FEC Identification Number

C

Transaction ID : VTQ0M9W60

Amount of Each Disbursement this Period

65.78

* Non-Contribution Account

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 198 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		08		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5X

Amount of Each Disbursement this Period

11.92

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		09		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5VI

Amount of Each Disbursement this Period

1.00

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Uber Technologies

Mailing Address 1440 Market St

City
San FranciscoState
CAZip Code
94102-6004Purpose of Disbursement
PEX Card - Travel, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		09		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5Y

Amount of Each Disbursement this Period

20.32

* Non-Contribution Account

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 199 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Verizon Wireless

Mailing Address 1 Verizon Way

City
Basking RidgeState
NJZip Code
07920-1097Purpose of Disbursement
Telecommunication Services

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2							2	0				8

FEC Identification Number

C

Transaction ID : VTQ0M9W5N

Amount of Each Disbursement this Period

310.80

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Westdrift Manhattan Beach

Mailing Address 1400 Park View Ave

City
Manhattan BeachState
CAZip Code
90266-3714Purpose of Disbursement
PEX Card - Lodging, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2							0	3				8

FEC Identification Number

C

Transaction ID : VTQ0M9W60

Amount of Each Disbursement this Period

208.34

* Non-Contribution Account

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Westdrift Manhattan Beach

Mailing Address 1400 Park View Ave

City
Manhattan BeachState
CAZip Code
90266-3714Purpose of Disbursement
PEX Card - Lodging, See Payment from 11/5/18

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2							0	5				8

FEC Identification Number

C

Transaction ID : VTQ0M9W61

Amount of Each Disbursement this Period

268.33

* Non-Contribution Account

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

310.80

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 200 OF 203

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Williams, Bradley, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

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
11			30			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5P

Amount of Each Disbursement this Period

2596.32

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Williams, Bradley, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

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
12			15			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5Q

Amount of Each Disbursement this Period

1442.40

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Williams, James, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

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
11			30			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9W5P

Amount of Each Disbursement this Period

726.84

Non-Contribution Account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4765.56

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 201 OF 203

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Williams, James, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2018

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9W5R

Amount of Each Disbursement this Period

484.56

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Woo, Danne, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2018

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9W5Q

Amount of Each Disbursement this Period

980.64

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Wood, Hope, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2018

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9W5P

Amount of Each Disbursement this Period

495.20

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1960.40

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 202 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Wood, Hope, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Travel Stipend

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		04		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5M

Amount of Each Disbursement this Period

25.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Wood, Hope, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Travel Stipend

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		12		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5M

Amount of Each Disbursement this Period

125.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Wood, Hope, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		15		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5C

Amount of Each Disbursement this Period

1826.05

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1976.05

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 203 OF 203

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Wood, Hope, , ,

Mailing Address 1714 Franklin St

City
OaklandState
CAZip Code
94612-3488Purpose of Disbursement
Salary

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2018

FEC Identification Number

C

Transaction ID : VTQ0M9W5R

Amount of Each Disbursement this Period

309.50

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

309.50

333931.30