

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.

The Democratic Coalition

ADDRESS (number and street)

Check if different than previously reported. (ACC)

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

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

4. TYPE OF REPORT (Choose One)

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

- (b) Monthly Report Due On:

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

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

<input type="checkbox"/> Primary (12P)	<input type="checkbox"/> General (12G)	<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> Convention (12C)	<input type="checkbox"/> Special (12S)	

Election on / / in the State of

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

<input type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
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Election on / / in the State of

5. Covering Period / / through / /

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

Signature of Treasurer [Electronically Filed] Date / /

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

The Democratic Coalition

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2022"/>		21941.64
(b) Cash on Hand at Beginning of Reporting Period.....	21941.64	
(c) Total Receipts (from Line 19)	8418.50	8418.50
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	30360.14	30360.14
7. Total Disbursements (from Line 31).....	16172.55	16172.55
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	14187.59	14187.59
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	5060.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

The Democratic Coalition

Report Covering the Period: From: 01 / 01 / 2022 To: 01 / 31 / 2022

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	460.00	460.00
(ii) Unitemized	7958.50	7958.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	8418.50	8418.50
(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)	8418.50	8418.50
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	8418.50	8418.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	8418.50	8418.50

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	16172.55	16172.55
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	16172.55	16172.55
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	16172.55	16172.55
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	16172.55	16172.55

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	8418.50	8418.50
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	8418.50	8418.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	16172.55	16172.55
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	16172.55	16172.55

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 15
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
The Democratic Coalition

A. Keen, Merrill, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20611 Lantana Ridge Ct
 City Cypress State TX Zip Code 77433-5935
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 23 / 2022
Transaction ID : VTE5QYRNMJ6
 Amount of Each Receipt this Period 250.00
 Memo Item
 * Earmarked Contribution: See Below

B. ActBlue
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 441146
 City West Somerville State MA Zip Code 02144-0031
 FEC ID number of contributing federal political committee. **C** C00401224
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 8418.50

Date of Receipt 01 / 23 / 2022
Transaction ID : VTE5QYRNMJ6E
 Amount of Each Receipt this Period 250.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

C. Steele, Gary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5141 Pioneer Way
 City Antioch State CA Zip Code 94531-8466
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SharePoint Developer Occupation (for Individual) Alameda Alliance for Health
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10.00

Date of Receipt 01 / 16 / 2022
Transaction ID : VTE5QYRM656
 Amount of Each Receipt this Period 10.00
 Memo Item
 * Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....	260.00
TOTAL This Period (last page this line number only).....	

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

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

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NAME OF COMMITTEE (In Full)
The Democratic Coalition

A. ActBlue
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual) Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
8418.50

Date of Receipt
MM / DD / YYYY
01 / 16 / 2022

Transaction ID : VTE5QYRM656E

Amount of Each Receipt this Period
100.00

Memo Item

Note: Above Contribution earmarked through this organization.

B. Steele, Gary, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5141 Pioneer Way

City Antioch	State CA	Zip Code 94531-8466
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)
SharePoint Developer Alameda Alliance for Health

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
MM / DD / YYYY
01 / 23 / 2022

Transaction ID : VTE5QYRNM03

Amount of Each Receipt this Period
100.00

Memo Item

* Earmarked Contribution: See Below

C. ActBlue
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual) Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
8418.50

Date of Receipt
MM / DD / YYYY
01 / 23 / 2022

Transaction ID : VTE5QYRNM03E

Amount of Each Receipt this Period
100.00

Memo Item

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

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

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

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NAME OF COMMITTEE (In Full)
The Democratic Coalition

A. Steele, Gary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5141 Pioneer Way
 City Antioch State CA Zip Code 94531-8466
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 SharePoint Developer Alameda Alliance for Health
 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
 01 / 23 / 2022
Transaction ID : VTE5QYRNM45
 Amount of Each Receipt this Period
 100.00
 Memo Item
 * Earmarked Contribution: See Below

B. ActBlue
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 441146
 City West Somerville State MA Zip Code 02144-0031
 FEC ID number of contributing federal political committee. **C** C00401224
 Name of Employer (for Individual) Occupation (for Individual)
 Conduit total listed in Agg. field
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 8418.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 23 / 2022
Transaction ID : VTE5QYRNM45E
 Amount of Each Receipt this Period
 100.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

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

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	460.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
The Democratic Coalition

Full Name (Last, First, Middle Initial)
A. ActBlue Technical Services

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement: 01 / 09 / 2022

FEC Identification Number: C

Transaction ID : VTD6FAF3EH

Amount of Each Disbursement this Period: 121.85

Memo Item

Full Name (Last, First, Middle Initial)
B. ActBlue Technical Services

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement: 01 / 16 / 2022

FEC Identification Number: C

Transaction ID : VTD6FAF3EJ

Amount of Each Disbursement this Period: 99.78

Memo Item

Full Name (Last, First, Middle Initial)
C. ActBlue Technical Services

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement: 01 / 23 / 2022

FEC Identification Number: C

Transaction ID : VTD6FAF3EI

Amount of Each Disbursement this Period: 106.07

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 327.70

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
The Democratic Coalition

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
01 / 30 / 2022

FEC Identification Number

C
Transaction ID : VTD6FAF3EN
Amount of Each Disbursement this Period
106.43

Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2022

FEC Identification Number

C
Transaction ID : VTD6FAF3EN
Amount of Each Disbursement this Period
6.42

Memo Item

Full Name (Last, First, Middle Initial)

C. Bulldog Finance Group

Mailing Address 1250 Connecticut Ave NW

City Washington State DC Zip Code 20036-2655

Purpose of Disbursement
Consultant - Research

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
01 / 18 / 2022

FEC Identification Number

C
Transaction ID : VTD6FAF3E
Amount of Each Disbursement this Period
1000.00

Memo Item

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

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

1112.85

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
The Democratic Coalition

A. Bulldog Finance Group

Full Name (Last, First, Middle Initial)

Mailing Address 1250 Connecticut Ave NW

City Washington State DC Zip Code 20036-2655

Purpose of Disbursement Consultant - Research

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 01 / 26 / 2022

FEC Identification Number C

Transaction ID : VTD6FAF3ET

Amount of Each Disbursement this Period 2500.00

Memo Item

B. Facebook

Full Name (Last, First, Middle Initial)

Mailing Address 1 Hacker Way

City Menlo Park State CA Zip Code 94025-1456

Purpose of Disbursement Advertisement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 01 / 13 / 2022

FEC Identification Number C

Transaction ID : VTD6FAF3F0!

Amount of Each Disbursement this Period 686.84

Memo Item

C. Financial Innovations

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement Printing Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 01 / 04 / 2022

FEC Identification Number C

Transaction ID : VTD6FAF3E!

Amount of Each Disbursement this Period 861.77

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 4048.61

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
The Democratic Coalition

A. Jones, Samuel, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 901 Lake Sierra Way

City Little Elm State TX Zip Code 75068-1260

Purpose of Disbursement Fundraising Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 14 / 2022

FEC Identification Number: C

Transaction ID : VTD6FAF3EC

Amount of Each Disbursement this Period: 1500.00

Memo Item

B. Jones, Samuel, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 901 Lake Sierra Way

City Little Elm State TX Zip Code 75068-1260

Purpose of Disbursement Fundraising Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 31 / 2022

FEC Identification Number: C

Transaction ID : VTD6FAF3ER

Amount of Each Disbursement this Period: 1500.00

Memo Item

C. McGrady, Sonya, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1707 N Charles St

City Baltimore State MD Zip Code 21201-5829

Purpose of Disbursement Compliance Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 25 / 2022

FEC Identification Number: C

Transaction ID : VTD6FAF3EI

Amount of Each Disbursement this Period: 2500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 5500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
The Democratic Coalition

Full Name (Last, First, Middle Initial)

A. Next Level Digital

Mailing Address 1004 9th St NE

City
Washington

State
DC

Zip Code
20002-3716

Purpose of Disbursement
Consultant - Digital

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 18 / 2022

FEC Identification Number

C
Transaction ID : VTD6FAF3EV
Amount of Each Disbursement this Period
1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Next Level Partners

Mailing Address 410 1st St SE
Ste 310

City
Washington

State
DC

Zip Code
20003-1866

Purpose of Disbursement
Consultant - Compliance

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 28 / 2022

FEC Identification Number

C
Transaction ID : VTD6FAF3EX
Amount of Each Disbursement this Period
3000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. The Action Network

Mailing Address 1900 L St NW

City
Washington

State
DC

Zip Code
20036-5002

Purpose of Disbursement
Online Fundraising

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2022

FEC Identification Number

C
Transaction ID : VTD6FAF3Ez
Amount of Each Disbursement this Period
921.14

Memo Item

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

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

4921.14

15910.30

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **The Democratic Coalition** Transaction ID : VTE5QM2EHY1L

LOAN SOURCE Full Name (Last, First, Middle Initial) Lerner, Miriam, , ,		<input checked="" type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1415 Converse Bay Rd			
City Charlotte	State VT	ZIP Code 05445-9430	

Original Amount of Loan 5000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 5000.00
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TERMS

Date Incurred MM / DD / YYYY 05 / 10 / 2016	Date Due MM / DD / YYYY 12 / 31 / 2020	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
City State ZIP Code	Amount Guaranteed Outstanding: []	
2. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
City State ZIP Code	Amount Guaranteed Outstanding: []	
3. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
City State ZIP Code	Amount Guaranteed Outstanding: []	
4. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
City State ZIP Code	Amount Guaranteed Outstanding: []	

SUBTOTALS This Period This Page (optional)	▶	5000.00
TOTALS This Period (last page in this line only)	▶	[]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **The Democratic Coalition** Transaction ID : VTE5QHS1YN4L

LOAN SOURCE Full Name (Last, First, Middle Initial) Lerner, Nathan, , ,		<input checked="" type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1207 Willow Ave Apt 16			
City Hoboken	State NJ	ZIP Code 07030-3347	

Original Amount of Loan <input type="text" value="60.00"/>	Cumulative Payment To Date <input type="text" value="0.00"/>	Balance Outstanding at Close of This Period <input type="text" value="60.00"/>
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TERMS

Date Incurred <input type="text" value="05"/> / <input type="text" value="20"/> / <input type="text" value="2016"/>	Date Due <input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2020"/>	Interest Rate <input type="text" value="0.00"/> % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
--	---	--	---

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)	<input type="text" value="60.00"/>
TOTALS This Period (last page in this line only)	<input type="text" value="5060.00"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.