

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

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

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00670216** 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period  /  /  2023 through  /  /  2023

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

Signature of Treasurer Guthman, Nick, , , [Electronically Filed] Date  /  /  2023

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**YOUTH PROGRESSIVE ACTION CATALYST**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2023"/>		76775.12
(b) Cash on Hand at Beginning of Reporting Period.....	76775.12	
(c) Total Receipts (from Line 19) .....	89685.62	89685.62
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	166460.74	166460.74
7. Total Disbursements (from Line 31).....	134424.24	134424.24
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	32036.50	32036.50
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

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

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

## DETAILED SUMMARY PAGE of Receipts

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Page 3

Write or Type Committee Name

**YOUTH PROGRESSIVE ACTION CATALYST**

Report Covering the Period: From: M M / D D / Y Y Y Y 01 / 01 / 2023 To: M M / D D / Y Y Y Y 06 / 30 / 2023

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).....	14518.00	14518.00
(ii) Unitemized .....	59629.69	59629.69
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	74147.69	74147.69
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	2000.00	2000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	76147.69	76147.69
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).....	750.00	750.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	12787.93	12787.93
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)).....▶	89685.62	89685.62
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	89685.62	89685.62

**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 .....	107487.72	107487.72
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	107487.72	107487.72
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	500.00	500.00
(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)).....	500.00	500.00
29. Other Disbursements (Including Non-Federal Donations).....	26436.52	26436.52
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)) ..	134424.24	134424.24
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	134424.24	134424.24

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	76147.69	76147.69
34. Total Contribution Refunds (from Line 28(d)) .....	500.00	500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	75647.69	75647.69
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	107487.72	107487.72
37. Offsets to Operating Expenditures (from Line 15, page 3).....	750.00	750.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	106737.72	106737.72

**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 83
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Bell, Stewart, , ,</b>			Date of Receipt
Mailing Address 240 Lincoln St			<input type="text" value="02"/> / <input type="text" value="09"/> / <input type="text" value="2023"/>
City Astoria	State OR	Zip Code 97103	<b>Transaction ID : SA11AI.34430</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="150.00"/>
Name of Employer (for Individual) Not Employed		Occupation (for Individual) Not Employed	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Bell, Stewart, , ,</b>			Date of Receipt
Mailing Address 240 Lincoln St			<input type="text" value="03"/> / <input type="text" value="09"/> / <input type="text" value="2023"/>
City Astoria	State OR	Zip Code 97103	<b>Transaction ID : SA11AI.34431</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="150.00"/>
Name of Employer (for Individual) Not Employed		Occupation (for Individual) Not Employed	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="450.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Bell, Stewart, , ,</b>			Date of Receipt
Mailing Address 240 Lincoln St			<input type="text" value="04"/> / <input type="text" value="09"/> / <input type="text" value="2023"/>
City Astoria	State OR	Zip Code 97103	<b>Transaction ID : SA11AI.34432</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="150.00"/>
Name of Employer (for Individual) Not Employed		Occupation (for Individual) Not Employed	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="600.00"/>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="450.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 240 Lincoln St

City Astoria	State OR	Zip Code 97103
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 09 / 2023  
**Transaction ID : SA11AI.34433**

Amount of Each Receipt this Period  
150.00

Memo Item

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

Mailing Address 240 Lincoln St

City Astoria	State OR	Zip Code 97103
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
900.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 09 / 2023  
**Transaction ID : SA11AI.34434**

Amount of Each Receipt this Period  
150.00

Memo Item

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

Mailing Address 261 Vista del Parque

City Redondo Beach	State CA	Zip Code 90277
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Not employed	Occupation (for Individual) Not employed
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 12 / 2023  
**Transaction ID : SA11AI.34435**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 OF 83
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

**A. Bender, Douglas, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 261 Vista del Parque

City Redondo Beach	State CA	Zip Code 90277
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Not employed	Occupation (for Individual) Not employed
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M M / D D / Y Y Y Y
04 / 10 / 2023

**Transaction ID : SA11AI.34436**

Amount of Each Receipt this Period  

1000.00
---------

 Memo Item

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

Mailing Address 325 Holly Road

City West Chester	State PA	Zip Code 19380
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) none	Occupation (for Individual) not employed
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  

M M / D D / Y Y Y Y
04 / 30 / 2023

**Transaction ID : SA11AI.34487**

Amount of Each Receipt this Period  

125.00
--------

 Memo Item

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

Mailing Address POB 39

City Gap Mills	State WV	Zip Code 24941
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
245.00

Date of Receipt  

M M / D D / Y Y Y Y
02 / 24 / 2023

**Transaction ID : SA11AI.34590**

Amount of Each Receipt this Period  

75.00
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 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Cohen, Naomi, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address POB 39

City Gap Mills	State WV	Zip Code 24941
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
370.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	12	/	2023

**Transaction ID : SA11AI.34591**

Amount of Each Receipt this Period  
125.00

Memo Item

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

Mailing Address POB 39

City Gap Mills	State WV	Zip Code 24941
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
410.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	22	/	2023

**Transaction ID : SA11AI.34592**

Amount of Each Receipt this Period  
40.00

Memo Item

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

Mailing Address POB 39

City Gap Mills	State WV	Zip Code 24941
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Not Employed
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
530.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	20	/	2023

**Transaction ID : SA11AI.34593**

Amount of Each Receipt this Period  
120.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	285.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 10 OF 83  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

**A. Cohen, Naomi, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address POB 39  
 City Gap Mills   State WV   Zip Code 24941  
 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 ▼ 650.00

Date of Receipt **05 / 12 / 2023**  
**Transaction ID : SA11AI.34594**  
 Amount of Each Receipt this Period 120.00  
 Memo Item

**B. Cohen, Naomi, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address POB 39  
 City Gap Mills   State WV   Zip Code 24941  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed   Occupation (for Individual) Not Employed  
 Receipt For:  Primary    General    Other (specify) ▼  
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt **06 / 08 / 2023**  
**Transaction ID : SA11AI.34595**  
 Amount of Each Receipt this Period 125.00  
 Memo Item

**C. Edwards, Jon, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 715  
 City South Freeport   State ME   Zip Code 04078  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self   Occupation (for Individual) Attorney  
 Receipt For:  Primary    General    Other (specify)  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **04 / 04 / 2023**  
**Transaction ID : SA11AI.34664**  
 Amount of Each Receipt this Period 150.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 395.00  
**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 11 OF 83
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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

**A. Edwards, Jon, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 715  
 City South Freeport State ME Zip Code 04078  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **300.00**

Date of Receipt **04 / 15 / 2023**  
**Transaction ID : SA11AI.34665**  
 Amount of Each Receipt this Period **25.00**  
 Memo Item

**B. Edwards, Jon, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 715  
 City South Freeport State ME Zip Code 04078  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **325.00**

Date of Receipt **05 / 15 / 2023**  
**Transaction ID : SA11AI.34666**  
 Amount of Each Receipt this Period **25.00**  
 Memo Item

**C. Edwards, Jon, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 715  
 City South Freeport State ME Zip Code 04078  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **350.00**

Date of Receipt **06 / 15 / 2023**  
**Transaction ID : SA11AI.34667**  
 Amount of Each Receipt this Period **25.00**  
 Memo Item

**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 12 OF 83  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

**A. Edwards, Jon, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 715  
 City South Freeport   State ME   Zip Code 04078  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self   Occupation (for Individual) Attorney  
 Receipt For:  Primary    General    Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 18 / 2023  
**Transaction ID : SA11AI.34668**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Faissler, Diane G., , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4 Darby Lane  
 City Rockport   State MA   Zip Code 01966  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) self   Occupation (for Individual) none  
 Receipt For:  Primary    General    Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 23 / 2023  
**Transaction ID : SA11AI.34702**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. Faissler, Diane G., , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4 Darby Lane  
 City Rockport   State MA   Zip Code 01966  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) self   Occupation (for Individual) none  
 Receipt For:  Primary    General    Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 28 / 2023  
**Transaction ID : SA11AI.34703**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 750.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 83
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Faissler, Diane G., , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4 Darby Lane  
 City Rockport State MA Zip Code 01966  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) self Occupation (for Individual) none  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2023  
**Transaction ID : SA11AI.34704**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Fluhner, Patricia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1068 N Eagle Hollow Rd  
 City Green Valley State AZ Zip Code 85614-6086  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 28 / 2023  
**Transaction ID : SA11AI.34723**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C. Fluhner, Patricia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1068 N Eagle Hollow Rd  
 City Green Valley State AZ Zip Code 85614-6086  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2023  
**Transaction ID : SA11AI.34724**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1250.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 83
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

**A. Fluhrer, Patricia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1068 N Eagle Hollow Rd  
 City Green Valley State AZ Zip Code 85614-6086  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 04 / 30 / 2023  
**Transaction ID : SA11AI.34725**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. Fluhrer, Patricia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1068 N Eagle Hollow Rd  
 City Green Valley State AZ Zip Code 85614-6086  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 05 / 25 / 2023  
**Transaction ID : SA11AI.34726**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Fluhrer, Patricia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1068 N Eagle Hollow Rd  
 City Green Valley State AZ Zip Code 85614-6086  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 06 / 13 / 2023  
**Transaction ID : SA11AI.34727**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 83
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Gaitley, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 180 Montgomery Street  
 City San Francisco State CA Zip Code 94114  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Legal Aid Occupation (for Individual) Lawyer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 05 / 2023  
**Transaction ID : SA11AI.34751**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. henkin, michelle, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15 Pipers Way  
 City New Harbor State ME Zip Code 04554  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) self Occupation (for Individual) artist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 11 / 2023  
**Transaction ID : SA11AI.34848**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**C. henkin, michelle, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15 Pipers Way  
 City New Harbor State ME Zip Code 04554  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) self Occupation (for Individual) artist  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 11 / 2023  
**Transaction ID : SA11AI.34849**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	350.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 16 OF 83  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. Kasparian, Gail, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6604 Kalgan Rd.  
 City Rio Rancho State NM Zip Code 87144  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 27 / 2023  
**Transaction ID : SA11AI.34918**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. Linderman, Christine E, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 277 Riverside Dr  
 City Florence State MA Zip Code 01062  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 13 / 2023  
**Transaction ID : SA11AI.35031**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Linderman, Christine E, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 277 Riverside Dr  
 City Florence State MA Zip Code 01062  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 13 / 2023  
**Transaction ID : SA11AI.35032**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Minter, Susan, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3314 Mackland Ne

City Albuquerque	State NM	Zip Code 87106
---------------------	-------------	-------------------

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

Name of Employer (for Individual) UNM	Occupation (for Individual) business analyst
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
217.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		09		2023

**Transaction ID : SA11AI.35150**

Amount of Each Receipt this Period  
30.00

Memo Item

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

Mailing Address 4847 N Winthrop Ave 1S

City Chicago	State IL	Zip Code 60640
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Northwestern	Occupation (for Individual) Physician
---	--

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
06		08		2023

**Transaction ID : SA11AI.35161**

Amount of Each Receipt this Period  
20.00

Memo Item

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

Mailing Address 4847 N Winthrop Ave 1S

City Chicago	State IL	Zip Code 60640
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Northwestern	Occupation (for Individual) Physician
---	--

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
06		10		2023

**Transaction ID : SA11AI.35162**

Amount of Each Receipt this Period  
20.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	70.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 18 OF 83
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. Montalvo, Jessica, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4847 N Winthrop Ave 1S  
 City Chicago State IL Zip Code 60640  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) Northwestern Occupation (for Individual) Physician  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 06 / 29 / 2023  
**Transaction ID : SA11AI.35163**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Moore, Deb, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 19 Murray Street  
 City Hampton State VA Zip Code 23651  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) Not employed Occupation (for Individual) Not employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 04 / 2023  
**Transaction ID : SA11AI.35173**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Moore, Deb, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 19 Murray Street  
 City Hampton State VA Zip Code 23651  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) Not employed Occupation (for Individual) Not employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 04 / 2023  
**Transaction ID : SA11AI.35174**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 83
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
nordhoff, nancy, , ,

Mailing Address 835 6th st

City Langley	State WA	Zip Code 98260
-----------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 22 / 2023

**Transaction ID : SA11AI.35212**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address 835 6th st

City Langley	State WA	Zip Code 98260
-----------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2023

**Transaction ID : SA11AI.35213**

Amount of Each Receipt this Period  
200.00

Memo Item

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

Mailing Address 835 6th st

City Langley	State WA	Zip Code 98260
-----------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 10 / 2023

**Transaction ID : SA11AI.35214**

Amount of Each Receipt this Period  
500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1200.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
nordhoff, nancy, , ,

Mailing Address 835 6th st

City Langley	State WA	Zip Code 98260
-----------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		24		2023

**Transaction ID : SA11AI.35215**

Amount of Each Receipt this Period  
100.00

Memo Item

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

Mailing Address 835 6th st

City Langley	State WA	Zip Code 98260
-----------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1800.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		25		2023

**Transaction ID : SA11AI.35216**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address 19 Blueberry Ridge Lane

City Chilmark	State MA	Zip Code 02535
------------------	-------------	-------------------

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 ▼  
369.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		28		2023

**Transaction ID : SA11AI.35218**

Amount of Each Receipt this Period  
369.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	969.00
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 21 OF 83
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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

**A. Overs, Mark, , ,**

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

Mailing Address N56 W21414 Silver Spring Dr.

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 08 / 2023

**Transaction ID : SA11AI.35244**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. Overs, Mark, , ,**

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

Mailing Address N56 W21414 Silver Spring Dr.

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 09 / 2023

**Transaction ID : SA11AI.35245**

Amount of Each Receipt this Period  
50.00

Memo Item

**C. Overs, Mark, , ,**

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

Mailing Address N56 W21414 Silver Spring Dr.

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

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2023

**Transaction ID : SA11AI.35246**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	250.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 83
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

**A. Overs, Mark, , ,**

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

Mailing Address N56 W21414 Silver Spring Dr.

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		09		2023

**Transaction ID : SA11AI.35247**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. Overs, Mark, , ,**

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

Mailing Address N56 W21414 Silver Spring Dr.

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
550.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		09		2023

**Transaction ID : SA11AI.35248**

Amount of Each Receipt this Period  
50.00

Memo Item

**C. Overs, Mark, , ,**

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

Mailing Address N56 W21414 Silver Spring Dr.

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

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		09		2023

**Transaction ID : SA11AI.35249**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	150.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 83
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Pedersen, Kirsten, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1198 SUNNY SLOPE RD #222

City LA POINTE	State WI	Zip Code 54850
-------------------	-------------	-------------------

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

Name of Employer (for Individual) Md Rd L/A Society Inc.	Occupation (for Individual) General Manager
---	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
227.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 08 / 2023  
**Transaction ID : SA11AI.35274**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. Pedersen, Kirsten, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1198 SUNNY SLOPE RD #222

City LA POINTE	State WI	Zip Code 54850
-------------------	-------------	-------------------

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

Name of Employer (for Individual) Md Rd L/A Society Inc.	Occupation (for Individual) General Manager
---	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
254.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2023  
**Transaction ID : SA11AI.35275**

Amount of Each Receipt this Period  
27.00

Memo Item

**C. Pedersen, Kirsten, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1198 SUNNY SLOPE RD #222

City LA POINTE	State WI	Zip Code 54850
-------------------	-------------	-------------------

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

Name of Employer (for Individual) Md Rd L/A Society Inc.	Occupation (for Individual) General Manager
---	--

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
281.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 06 / 2023  
**Transaction ID : SA11AI.35276**

Amount of Each Receipt this Period  
27.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	154.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Pedersen, Kirsten, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1198 SUNNY SLOPE RD #222

City LA POINTE	State WI	Zip Code 54850
-------------------	-------------	-------------------

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

Name of Employer (for Individual) Md Rd L/A Society Inc.	Occupation (for Individual) General Manager
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
306.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		15		2023

**Transaction ID : SA11AI.35277**

Amount of Each Receipt this Period  
25.00

Memo Item

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

Mailing Address 1198 SUNNY SLOPE RD #222

City LA POINTE	State WI	Zip Code 54850
-------------------	-------------	-------------------

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

Name of Employer (for Individual) Md Rd L/A Society Inc.	Occupation (for Individual) General Manager
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		16		2023

**Transaction ID : SA11AI.35278**

Amount of Each Receipt this Period  
27.00

Memo Item

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

Mailing Address 453 Berner Ave

City Hazleton	State PA	Zip Code 18201
------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02		01		2023

**Transaction ID : SA11AI.35332**

Amount of Each Receipt this Period  
500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	552.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

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

FOR LINE NUMBER: PAGE 25 OF 83  
(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)  
**YOUTH PROGRESSIVE ACTION CATALYST**

**A. Roth, David R, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3936 SE Ankeny St  
 City portland State OR Zip Code 97214  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 14 / 2023  
**Transaction ID : SA11AI.35378**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**B. Roth, David R, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3936 SE Ankeny St  
 City portland State OR Zip Code 97214  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 16 / 2023  
**Transaction ID : SA11AI.35379**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**C. Roth, David R, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3936 SE Ankeny St  
 City portland State OR Zip Code 97214  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 14 / 2023  
**Transaction ID : SA11AI.35380**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 83
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Roth, David R, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3936 SE Ankeny St  
 City portland State OR Zip Code 97214  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 16 / 2023  
**Transaction ID : SA11AI.35381**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Roth, David R, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3936 SE Ankeny St  
 City portland State OR Zip Code 97214  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 14 / 2023  
**Transaction ID : SA11AI.35382**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Roth, David R, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3936 SE Ankeny St  
 City portland State OR Zip Code 97214  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 16 / 2023  
**Transaction ID : SA11AI.35383**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 27 OF 83
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. Safier, Renee, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 516 N. Francisco Ave.

City unit C	State CA	Zip Code 90277
----------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		02		2023

**Transaction ID : SA11AI.35404**

Amount of Each Receipt this Period  
25.00

Memo Item

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

Mailing Address 516 N. Francisco Ave.

City unit C	State CA	Zip Code 90277
----------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		13		2023

**Transaction ID : SA11AI.35405**

Amount of Each Receipt this Period  
25.00

Memo Item

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

Mailing Address 516 N. Francisco Ave.

City unit C	State CA	Zip Code 90277
----------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		02		2023

**Transaction ID : SA11AI.35406**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	75.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Safier, Renee, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 516 N. Francisco Ave.  
 City unit C State CA Zip Code 90277  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) self Occupation (for Individual) musician  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 13 / 2023  
**Transaction ID : SA11AI.35407**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**B. Scheiter, Joseph, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1900 W. Olney Ave. La Salle Univ.  
 City philadelphia State PA Zip Code 19141-1199  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) none Occupation (for Individual) none  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 24 / 2023  
**Transaction ID : SA11AI.35437**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C. Skilton, Andrew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9306 Elmhirst Dr  
 City Bethesda State MD Zip Code 20814  
 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 ▼ 209.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2023  
**Transaction ID : SA11AI.35477**  
 Amount of Each Receipt this Period  
 175.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	700.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

**A. Skilton, Andrew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9306 Elmhirst Dr  
 City Bethesda State MD Zip Code 20814  
 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 ▼ 226.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2023  
**Transaction ID : SA11AI.35478**  
 Amount of Each Receipt this Period  
 17.00  
 Memo Item

**B. Skilton, Andrew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9306 Elmhirst Dr  
 City Bethesda State MD Zip Code 20814  
 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 ▼ 243.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 25 / 2023  
**Transaction ID : SA11AI.35479**  
 Amount of Each Receipt this Period  
 17.00  
 Memo Item

**C. Skilton, Andrew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9306 Elmhirst Dr  
 City Bethesda State MD Zip Code 20814  
 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 ▼ 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 25 / 2023  
**Transaction ID : SA11AI.35480**  
 Amount of Each Receipt this Period  
 17.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	51.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

**A. Skilton, Andrew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9306 Elmhurst Dr  
 City Bethesda State MD Zip Code 20814  
 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 ▼ 277.00

Date of Receipt 06 / 25 / 2023  
**Transaction ID : SA11AI.35481**  
 Amount of Each Receipt this Period 17.00  
 Memo Item

**B. Smudz, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4655 Haymarket  
 City Columbus State OH Zip Code 43220  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 01 / 24 / 2023  
**Transaction ID : SA11AI.35497**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. Smudz, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4655 Haymarket  
 City Columbus State OH Zip Code 43220  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 02 / 03 / 2023  
**Transaction ID : SA11AI.35498**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	167.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 31 OF 83
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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

**A. Smudz, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4655 Haymarket  
 City Columbus State OH Zip Code 43220  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 02 / 19 / 2023  
**Transaction ID : SA11AI.35499**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**B. Smudz, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4655 Haymarket  
 City Columbus State OH Zip Code 43220  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
 02 / 24 / 2023  
**Transaction ID : SA11AI.35500**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**C. Smudz, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4655 Haymarket  
 City Columbus State OH Zip Code 43220  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 02 / 28 / 2023  
**Transaction ID : SA11AI.35501**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 83
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

**A. Smudz, Susan, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4655 Haymarket

City Columbus	State OH	Zip Code 43220
------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	11	/	2023

**Transaction ID : SA11AI.35502**

Amount of Each Receipt this Period  
50.00

Memo Item

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

Mailing Address 4655 Haymarket

City Columbus	State OH	Zip Code 43220
------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
800.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	17	/	2023

**Transaction ID : SA11AI.35503**

Amount of Each Receipt this Period  
100.00

Memo Item

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

Mailing Address 4655 Haymarket

City Columbus	State OH	Zip Code 43220
------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
900.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	26	/	2023

**Transaction ID : SA11AI.35504**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 33 OF 83
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. Smudz, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4655 Haymarket  
 City Columbus State OH Zip Code 43220  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 01 / 2023  
**Transaction ID : SA11AI.35505**  
 Amount of Each Receipt this Period  
 200.00  
 Memo Item

**B. Smudz, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4655 Haymarket  
 City Columbus State OH Zip Code 43220  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 04 / 2023  
**Transaction ID : SA11AI.35506**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**C. Smudz, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4655 Haymarket  
 City Columbus State OH Zip Code 43220  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2023  
**Transaction ID : SA11AI.35507**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	400.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. Smudz, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4655 Haymarket  
 City Columbus State OH Zip Code 43220  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt **04 / 20 / 2023**  
**Transaction ID : SA11AI.35508**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. Smudz, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4655 Haymarket  
 City Columbus State OH Zip Code 43220  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt **06 / 10 / 2023**  
**Transaction ID : SA11AI.35509**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. Steinhauer, Jerome, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 221 S Owen Drive  
 City Madison State WI Zip Code 53705  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Singlewire Software Occupation (for Individual) CTO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **02 / 04 / 2023**  
**Transaction ID : SA11AI.35537**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	400.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 83
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. Steinhauer, Jerome, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 221 S Owen Drive  
 City Madison State WI Zip Code 53705  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Singlewire Software Occupation (for Individual) CTO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2023  
**Transaction ID : SA11AI.35538**  
 Amount of Each Receipt this Period  
 200.00  
 Memo Item

**B. Vance, Cynthia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1055 Wisconsin Ave  
 City U State DC Zip Code 20007  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Sotheby's Occupation (for Individual) Real Estate  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 27 / 2023  
**Transaction ID : SA11AI.35599**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C. Weaver, Douglas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4471 Dogwood Ct  
 City North Canton State OH Zip Code 44720  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Goodyear Tire Occupation (for Individual) Engineer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 23 / 2023  
**Transaction ID : SA11AI.35647**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	725.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 36 OF 83  
(check only one)

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

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

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Weaver, Douglas, , ,

Mailing Address 4471 Dogwood Ct

City North Canton	State OH	Zip Code 44720
----------------------	-------------	-------------------

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

Name of Employer (for Individual) Goodyear Tire	Occupation (for Individual) Engineer
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
06	/	27	/	2023

**Transaction ID : SA11AI.35648**

Amount of Each Receipt this Period  
25.00

Memo Item

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

Mailing Address

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

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

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	25.00
<b>TOTAL</b> This Period (last page this line number only).....	14518.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 37 OF 83
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
NATIONAL UNION OF HEALTHCARE WORKERS FEDERAL COMMITTEE ON POLITICAL EDUCATION

Mailing Address 1787 TRIBUTE ROAD, SUITE K

City SACRAMENTO	State CA	Zip Code 95815
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00461418

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
02		06		2023

**Transaction ID : SA11C.35734**

Amount of Each Receipt this Period  
2000.00

Memo Item

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

Mailing Address

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

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

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2000.00
<b>TOTAL</b> This Period (last page this line number only).....	2000.00

**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 38 OF 83
<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 checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**Ghassemieh, Donya, , ,**

Mailing Address 13009 Blairwood Dr

City Studio City	State CA	Zip Code 91604
---------------------	-------------	-------------------

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 ▼  
225.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	17	/	2023

**Transaction ID : SA15.35737**

Amount of Each Receipt this Period  
150.00

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**Gonzalez, Marco J., , ,**

Mailing Address 3701 California St

City Dickinson	State TX	Zip Code 77539
-------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	17	/	2023

**Transaction ID : SA15.35735**

Amount of Each Receipt this Period  
150.00

Memo Item

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

Mailing Address

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

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period

Memo Item

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

**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 39 OF 83
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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

**A. GRASSROOTS DEMOCRATS HQ**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 249 E OCEAN BL #685

City LONG BEACH	State CA	Zip Code 90802
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00707091

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03		08		2023

**Transaction ID : SA17.35721**

Amount of Each Receipt this Period  
10000.00

Memo Item  
Contribution - IE Only Account

**B. GRASSROOTS DEMOCRATS HQ**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 249 E OCEAN BL #685

City LONG BEACH	State CA	Zip Code 90802
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00707091

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
12400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		10		2023

**Transaction ID : SA17.35722**

Amount of Each Receipt this Period  
2400.00

Memo Item  
Contribution - IE Only Account

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

Mailing Address 1756 NW Grant Cir

City Corvallis	State OR	Zip Code 97330
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)  
Self Manuscript Editor

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
04		12		2023

**Transaction ID : SA17.35723**

Amount of Each Receipt this Period  
200.00

Memo Item  
Contribution - IE Only Account

<b>SUBTOTAL</b> of Receipts This Page (optional).....	12600.00
<b>TOTAL</b> This Period (last page this line number only).....	12600.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address PO Box 441146

City  
Somerville

State  
MA

Zip Code  
02144

Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.35876

Amount of Each Disbursement this Period

[REDACTED] 2919.11

Memo Item

Full Name (Last, First, Middle Initial)

**B. Action Squared LLC**

Mailing Address 1900 L Street, NW  
Suite 900

City  
Washington

State  
DC

Zip Code  
20036

Purpose of Disbursement  
Database Management

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	9		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.35801

Amount of Each Disbursement this Period

[REDACTED] 1582.05

Memo Item

Full Name (Last, First, Middle Initial)

**C. Action Squared LLC**

Mailing Address 1900 L Street, NW  
Suite 900

City  
Washington

State  
DC

Zip Code  
20036

Purpose of Disbursement  
Database Management

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	8		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.35812

Amount of Each Disbursement this Period

[REDACTED] 2145.23

Memo Item

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

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

[REDACTED] 6646.39

[REDACTED]



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

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

Full Name (Last, First, Middle Initial) <b>A. Action Squared LLC</b>		Date of Disbursement MM / DD / YYYY 03 / 07 / 2023	
Mailing Address 1900 L Street, NW Suite 900		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.35827</b>	
City Washington	State DC	Zip Code 20036	Amount of Each Disbursement this Period [REDACTED] 1901.75
Purpose of Disbursement Database Management		Category/ Type [REDACTED]	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Action Squared LLC</b>		Date of Disbursement MM / DD / YYYY 04 / 07 / 2023	
Mailing Address 1900 L Street, NW Suite 900		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.35839</b>	
City Washington	State DC	Zip Code 20036	Amount of Each Disbursement this Period [REDACTED] 2051.74
Purpose of Disbursement Database Management		Category/ Type [REDACTED]	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Action Squared LLC</b>		Date of Disbursement MM / DD / YYYY 05 / 08 / 2023	
Mailing Address 1900 L Street, NW Suite 900		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.35846</b>	
City Washington	State DC	Zip Code 20036	Amount of Each Disbursement this Period [REDACTED] 2102.62
Purpose of Disbursement Database Management		Category/ Type [REDACTED]	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 6056.11
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Action Squared LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 1900 L Street, NW  
Suite 900

City Washington State DC Zip Code 20036

Purpose of Disbursement Database Management

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement 06 / 06 / 2023

FEC Identification Number C

Transaction ID : SB21B.35864

Amount of Each Disbursement this Period 2119.15

Memo Item

**B. Barbosa, Andre F., , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 10101 Hampton Road

City Fairfax Station State VA Zip Code 22039

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement 04 / 12 / 2023

FEC Identification Number C

Transaction ID : SB21B.35880

Amount of Each Disbursement this Period 225.00

Memo Item

**C. Boykin, Jordan A., , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 7922 Wolfield Lane

City Houston State TX Zip Code 77071

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement 04 / 12 / 2023

FEC Identification Number C

Transaction ID : SB21B.35884

Amount of Each Disbursement this Period 225.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2569.15

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Brooks, Niles M., , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 4529 Bassett Hall Dr.

City Memphis State TN Zip Code 38125

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 03 / 2023

FEC Identification Number: C

Transaction ID : SB21B.35798

Amount of Each Disbursement this Period: 2000.00

Memo Item

**B. Crichlow, Glorianna, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 14 Monson Street

City Johnston State RI Zip Code 02919

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 12 / 2023

FEC Identification Number: C

Transaction ID : SB21B.35889

Amount of Each Disbursement this Period: 225.00

Memo Item

**C. Darrow, Lydia D., , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 370 Riverside Drive  
7D

City New York State NY Zip Code 10025

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 12 / 2023

FEC Identification Number: C

Transaction ID : SB21B.35892

Amount of Each Disbursement this Period: 225.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2450.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. Dials, Jacob D., , ,**

Mailing Address 41335 West Laramie Rd

City Maricopa State AZ Zip Code 85138

Purpose of Disbursement  
Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
04 / 12 / 2023

FEC Identification Number

C

Transaction ID : SB21B.35896

Amount of Each Disbursement this Period

225.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Dondeti, Ridhi R., , ,**

Mailing Address 6559 Red Cedar Way

City Carmel State IN Zip Code 46033

Purpose of Disbursement  
Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
04 / 12 / 2023

FEC Identification Number

C

Transaction ID : SB21B.35900

Amount of Each Disbursement this Period

225.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Duncan-High, Ella K., , ,**

Mailing Address 6016 Marilyn Drive

City Alexandria State VA Zip Code 22310

Purpose of Disbursement  
Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
04 / 12 / 2023

FEC Identification Number

C

Transaction ID : SB21B.35904

Amount of Each Disbursement this Period

225.00

Memo Item

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

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

675.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. English, Kate E., , ,**

Mailing Address 101 N Merion Ave  
Box #356

City  
Bryn Mawr

State  
PA

Zip Code  
19010

Purpose of Disbursement  
Strategic Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.35908**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Ganemtare, Yasmine A., , ,**

Mailing Address 196 Benton Ave

City  
Staten Island

State  
NY

Zip Code  
10305

Purpose of Disbursement  
Strategic Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.35912**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Google**

Mailing Address 1600 Amphitheatre Parkway

City  
Mountain View

State  
CA

Zip Code  
94043

Purpose of Disbursement  
Technology Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.35872**

Amount of Each Disbursement this Period

Memo Item

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

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

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

Full Name (Last, First, Middle Initial)

Mailing Address 10913 Lindblade St.

City Culver City State CA Zip Code 90230

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 01 / 2023

FEC Identification Number: C

Transaction ID : SB21B.35810

Amount of Each Disbursement this Period: 304.22

Memo Item

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

Full Name (Last, First, Middle Initial)

Mailing Address 10913 Lindblade St.

City Culver City State CA Zip Code 90230

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 28 / 2023

FEC Identification Number: C

Transaction ID : SB21B.35823

Amount of Each Disbursement this Period: 3154.00

Memo Item

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

Full Name (Last, First, Middle Initial)

Mailing Address 10913 Lindblade St.

City Culver City State CA Zip Code 90230

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 02 / 2023

FEC Identification Number: C

Transaction ID : SB21B.35848

Amount of Each Disbursement this Period: 304.22

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 3762.44

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

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

Full Name (Last, First, Middle Initial)

Mailing Address 10913 Lindblade St.

City Culver City State CA Zip Code 90230

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 12 / 2023

FEC Identification Number: C

Transaction ID : SB21B.35853

Amount of Each Disbursement this Period: 3154.00

Memo Item

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

Full Name (Last, First, Middle Initial)

Mailing Address 10913 Lindblade St.

City Culver City State CA Zip Code 90230

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 31 / 2023

FEC Identification Number: C

Transaction ID : SB21B.35861

Amount of Each Disbursement this Period: 3154.00

Memo Item

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

Full Name (Last, First, Middle Initial)

Mailing Address 10913 Lindblade St.

City Culver City State CA Zip Code 90230

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 13 / 2023

FEC Identification Number: C

Transaction ID : SB21B.35867

Amount of Each Disbursement this Period: 54.40

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 6362.40

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

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

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

FOR LINE NUMBER: (check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Guthman, Nick, , ,</b>		Date of Disbursement MM / DD / YYYY 06 / 13 / 2023	
Mailing Address 10913 Lindblade St.		FEC Identification Number C [ ] <b>Transaction ID : SB21B.35869</b> Amount of Each Disbursement this Period [ ] 304.22	
City Culver City	State CA	Zip Code 90230	Category/ Type [ ]
Purpose of Disbursement Strategic Consulting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Hernandez, Maria, , ,</b>		Date of Disbursement MM / DD / YYYY 01 / 03 / 2023	
Mailing Address 12253 Pender Creek Circle Apt B53		FEC Identification Number C [ ] <b>Transaction ID : SB21B.35797</b> Amount of Each Disbursement this Period [ ] 2000.00	
City Fairfax	State VA	Zip Code 22030	Category/ Type [ ]
Purpose of Disbursement Strategic Consulting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Jong, Ye J., , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 12 / 2023	
Mailing Address 5198 Cumberland Dr.		FEC Identification Number C [ ] <b>Transaction ID : SB21B.35911</b> Amount of Each Disbursement this Period [ ] 225.00	
City Cypress	State CA	Zip Code 90630	Category/ Type [ ]
Purpose of Disbursement Strategic Consulting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 2529.22
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]



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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Kitariev, Abbie S., , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 1600 S Eads St  
1204N

City Arlington State VA Zip Code 22202

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 04 / 12 / 2023

FEC Identification Number: C

Transaction ID : SB21B.35919

Amount of Each Disbursement this Period: 225.00

Memo Item

**B. L'Bahy, Nadia, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 46 Marshall Street  
Apt 3

City Somerville State MA Zip Code 02145

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 04 / 12 / 2023

FEC Identification Number: C

Transaction ID : SB21B.35926

Amount of Each Disbursement this Period: 225.00

Memo Item

**C. Lanne, Mac-Olivier, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 1588 President Street  
Apt 23

City Brooklyn State NY Zip Code 11213

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 04 / 12 / 2023

FEC Identification Number: C

Transaction ID : SB21B.35922

Amount of Each Disbursement this Period: 225.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 675.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. Leko, Marija, , ,**

Mailing Address 10295 48th Avenue, apt i101  
1 campus drive

City Allendale State MI Zip Code 49401

Purpose of Disbursement  
Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.35930**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Loyd, Tahm, , ,**

Mailing Address 7719 Countryside Dr.

City Bloomington State MN Zip Code 55438

Purpose of Disbursement  
Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.35933**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Meadows, Quinton, , ,**

Mailing Address 4167 Duquesne Ave.

City Culver City State CA Zip Code 90232

Purpose of Disbursement  
Video Production

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.35815**  
Amount of Each Disbursement this Period

Memo Item

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

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Mehta, Sage P., , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 3650 Spruce Street

City Philadelphia State PA Zip Code 19104

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 01 / 31 / 2023

FEC Identification Number: C

Transaction ID : SB21B.35807

Amount of Each Disbursement this Period: 250.00

Memo Item

**B. Mehta, Sage P., , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 3650 Spruce Street

City Philadelphia State PA Zip Code 19104

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 02 / 15 / 2023

FEC Identification Number: C

Transaction ID : SB21B.35818

Amount of Each Disbursement this Period: 250.00

Memo Item

**C. Mehta, Sage P., , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 3650 Spruce Street

City Philadelphia State PA Zip Code 19104

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 02 / 28 / 2023

FEC Identification Number: C

Transaction ID : SB21B.35821

Amount of Each Disbursement this Period: 250.00

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Mehta, Sage P., , ,</b>		Date of Disbursement MM / DD / YYYY 03 / 28 / 2023	
Mailing Address 3650 Spruce Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.35831</b>	
City Philadelphia	State PA	Zip Code 19104	Amount of Each Disbursement this Period [ ] 250.00
Purpose of Disbursement Strategic Consulting		Category/Type [ ]	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Mehta, Sage P., , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 04 / 2023	
Mailing Address 3650 Spruce Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.35836</b>	
City Philadelphia	State PA	Zip Code 19104	Amount of Each Disbursement this Period [ ] 250.00
Purpose of Disbursement Strategic Consulting		Category/Type [ ]	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Mehta, Sage P., , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 27 / 2023	
Mailing Address 3650 Spruce Street		FEC Identification Number C [ ] <b>Transaction ID : SB21B.35844</b>	
City Philadelphia	State PA	Zip Code 19104	Amount of Each Disbursement this Period [ ] 250.00
Purpose of Disbursement Strategic Consulting		Category/Type [ ]	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Mehta, Sage P., , ,**

Mailing Address 3650 Spruce Street

City Philadelphia

State PA

Zip Code 19104

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 12 / 2023

FEC Identification Number

C  
**Transaction ID : SB21B.35855**  
Amount of Each Disbursement this Period  
250.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Mejorada Sesma, David A., , ,**

Mailing Address 6446 Caledon Pl

City Rancho Cucamonga

State CA

Zip Code 91737

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 12 / 2023

FEC Identification Number

C  
**Transaction ID : SB21B.35936**  
Amount of Each Disbursement this Period  
225.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Obioha, Eneanya C., , ,**

Mailing Address 5209 Spurr Terr

City Ellicott City

State MD

Zip Code 21043

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 12 / 2023

FEC Identification Number

C  
**Transaction ID : SB21B.3594t**  
Amount of Each Disbursement this Period  
225.00

Memo Item

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

700.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Patel, Prisha P., , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 7053 Post Preserve Blvd

City Dublin State OH Zip Code 43016

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 12 / 2023

FEC Identification Number: C

Transaction ID : SB21B.35943

Amount of Each Disbursement this Period: 225.00

Memo Item

**B. Portela, Katia, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 4333 Nebraska Avenue NW

City Washington State DC Zip Code 20016

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 12 / 2023

FEC Identification Number: C

Transaction ID : SB21B.35947

Amount of Each Disbursement this Period: 225.00

Memo Item

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

Full Name (Last, First, Middle Initial)

Mailing Address 1090 Vermont Ave. NW Suite 750

City Washington State DC Zip Code 20005

Purpose of Disbursement Legal Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 18 / 2023

FEC Identification Number: C

Transaction ID : SB21B.35804

Amount of Each Disbursement this Period: 750.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1200.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Siddiqui, Aaeshah F., , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 74 Timberview Dr.

City Rochester Hills State MI Zip Code 48307

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 12 / 2023

FEC Identification Number: C

Transaction ID : SB21B.35951

Amount of Each Disbursement this Period: 225.00

Memo Item

**B. Singh, Jessica P., , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 4815 Pannel Ct

City Stockton State CA Zip Code 95206

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 12 / 2023

FEC Identification Number: C

Transaction ID : SB21B.35954

Amount of Each Disbursement this Period: 225.00

Memo Item

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

Full Name (Last, First, Middle Initial)

Mailing Address 515 S Poplar St

City Hazleton State PA Zip Code 18201

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 31 / 2023

FEC Identification Number: C

Transaction ID : SB21B.35808

Amount of Each Disbursement this Period: 3154.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 3604.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

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

Full Name (Last, First, Middle Initial)

Mailing Address 515 S Poplar St

City Hazleton State PA Zip Code 18201

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 02 / 15 / 2023

FEC Identification Number: C

Transaction ID : SB21B.35817

Amount of Each Disbursement this Period: 3154.00

Memo Item

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

Full Name (Last, First, Middle Initial)

Mailing Address 515 S Poplar St

City Hazleton State PA Zip Code 18201

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 02 / 28 / 2023

FEC Identification Number: C

Transaction ID : SB21B.35822

Amount of Each Disbursement this Period: 3154.00

Memo Item

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

Full Name (Last, First, Middle Initial)

Mailing Address 515 S Poplar St

City Hazleton State PA Zip Code 18201

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 03 / 28 / 2023

FEC Identification Number: C

Transaction ID : SB21B.35834

Amount of Each Disbursement this Period: 3154.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 9462.00

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Stahr, Morgan, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 27 / 2023	
Mailing Address 515 S Poplar St		FEC Identification Number C [ ] <b>Transaction ID : SB21B.35845</b> Amount of Each Disbursement this Period [ ] 3154.00	
City Hazleton	State PA	Zip Code 18201	Category/ Type [ ]
Purpose of Disbursement Strategic Consulting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>	
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Stahr, Morgan, , ,</b>		Date of Disbursement MM / DD / YYYY 05 / 12 / 2023	
Mailing Address 515 S Poplar St		FEC Identification Number C [ ] <b>Transaction ID : SB21B.35852</b> Amount of Each Disbursement this Period [ ] 3154.00	
City Hazleton	State PA	Zip Code 18201	Category/ Type [ ]
Purpose of Disbursement Strategic Consulting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>	
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Strachn, Christina M., , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 12 / 2023	
Mailing Address 47 N Bleeker St Apt 3R 3R		FEC Identification Number C [ ] <b>Transaction ID : SB21B.35958</b> Amount of Each Disbursement this Period [ ] 225.00	
City Mount Vernon	State NY	Zip Code 10550	Category/ Type [ ]
Purpose of Disbursement Strategic Consulting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>	
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 6533.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Strategy & Hustle LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 3216 Central Ave NE

City Washington State DC Zip Code 20018

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 01 / 10 / 2023

FEC Identification Number: C

Transaction ID : SB21B.35802

Amount of Each Disbursement this Period: 5000.00

Memo Item

**B. Strategy & Hustle LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 3216 Central Ave NE

City Washington State DC Zip Code 20018

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 02 / 08 / 2023

FEC Identification Number: C

Transaction ID : SB21B.35814

Amount of Each Disbursement this Period: 5000.00

Memo Item

**C. Strategy & Hustle LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 3216 Central Ave NE

City Washington State DC Zip Code 20018

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 03 / 21 / 2023

FEC Identification Number: C

Transaction ID : SB21B.35828

Amount of Each Disbursement this Period: 5000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 15000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Strategy & Hustle LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 3216 Central Ave NE

City Washington State DC Zip Code 20018

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 04 / 07 / 2023

FEC Identification Number: C

Transaction ID : SB21B.35840

Amount of Each Disbursement this Period: 5000.00

Memo Item

**B. Strategy & Hustle LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 3216 Central Ave NE

City Washington State DC Zip Code 20018

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 05 / 23 / 2023

FEC Identification Number: C

Transaction ID : SB21B.35857

Amount of Each Disbursement this Period: 5000.00

Memo Item

**C. Strategy & Hustle LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 3216 Central Ave NE

City Washington State DC Zip Code 20018

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 06 / 13 / 2023

FEC Identification Number: C

Transaction ID : SB21B.35868

Amount of Each Disbursement this Period: 5000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 15000.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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

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

**A. Thompson, Kaliyah J., , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 6056 Kindling Court

City Lancaster State CA Zip Code 93536

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 12 / 2023

FEC Identification Number: C

Transaction ID : SB21B.35962

Amount of Each Disbursement this Period: 225.00

Memo Item

**B. Unfiltered Media LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 2663 Manhattan Place #102

City Vienna State VA Zip Code 22180

Purpose of Disbursement Digital Consulting Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 09 / 2023

FEC Identification Number: C

Transaction ID : SB21B.35800

Amount of Each Disbursement this Period: 1200.00

Memo Item

**C. Unfiltered Media LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 2663 Manhattan Place #102

City Vienna State VA Zip Code 22180

Purpose of Disbursement Digital Consulting Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 06 / 2023

FEC Identification Number: C

Transaction ID : SB21B.35811

Amount of Each Disbursement this Period: 1200.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2625.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

### A. Unfiltered Media LLC

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	2	3

Mailing Address 2663 Manhattan Place  
#102

City Vienna State VA Zip Code 22180

Purpose of Disbursement  
Digital Consulting Services

FEC Identification Number

C

Transaction ID : SB21B.35824  
Amount of Each Disbursement this Period

1200.00

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Memo Item

Full Name (Last, First, Middle Initial)

### B. Unfiltered Media LLC

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	8		2	0	2	3

Mailing Address 2663 Manhattan Place  
#102

City Vienna State VA Zip Code 22180

Purpose of Disbursement  
Digital Consulting Services

FEC Identification Number

C

Transaction ID : SB21B.35833  
Amount of Each Disbursement this Period

1200.00

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Memo Item

Full Name (Last, First, Middle Initial)

### C. Unfiltered Media LLC

Date of Disbursement

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

Mailing Address 2663 Manhattan Place  
#102

City Vienna State VA Zip Code 22180

Purpose of Disbursement  
Digital Consulting Services

FEC Identification Number

C

Transaction ID : SB21B.35851  
Amount of Each Disbursement this Period

1200.00

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Memo Item

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

3600.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

### A. Unfiltered Media LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		12		2023

Mailing Address 2663 Manhattan Place  
#102

City Vienna State VA Zip Code 22180

Purpose of Disbursement  
Payroll Processing Fees

FEC Identification Number

C

Transaction ID : SB21B.35854  
Amount of Each Disbursement this Period

634.24

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

### B. Unfiltered Media LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		25		2023

Mailing Address 2663 Manhattan Place  
#102

City Vienna State VA Zip Code 22180

Purpose of Disbursement  
Payroll Processing Fees

FEC Identification Number

C

Transaction ID : SB21B.35858  
Amount of Each Disbursement this Period

686.56

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

### C. Unfiltered Media LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		02		2023

Mailing Address 2663 Manhattan Place  
#102

City Vienna State VA Zip Code 22180

Purpose of Disbursement  
Payroll Processing Fees

FEC Identification Number

C

Transaction ID : SB21B.35863  
Amount of Each Disbursement this Period

581.92

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Memo Item

State: District:

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

1902.72

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Unfiltered Media LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		07		2023

Mailing Address 2663 Manhattan Place  
#102

City Vienna State VA Zip Code 22180

Purpose of Disbursement  
Digital Consulting Services

FEC Identification Number

C	Transaction ID : SB21B.35865
Amount of Each Disbursement this Period	
1200.00	

Candidate Name

Category/  
Type

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

Memo Item

Full Name (Last, First, Middle Initial)

**B. Unfiltered Media LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		14		2023

Mailing Address 2663 Manhattan Place  
#102

City Vienna State VA Zip Code 22180

Purpose of Disbursement  
Payroll

FEC Identification Number

C	Transaction ID : SB21B.35870
Amount of Each Disbursement this Period	
2972.31	

Candidate Name

Category/  
Type

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

Memo Item

Full Name (Last, First, Middle Initial)

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		14		2023

Mailing Address 515 S Poplar St

City Hazleton State PA Zip Code 18201

Purpose of Disbursement  
Payroll

FEC Identification Number

C	Transaction ID : SB21B.35871
Amount of Each Disbursement this Period	
2972.31	

Candidate Name

Category/  
Type

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

Memo Item

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

4172.31
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**TOTAL** This Period (last page this line number only)..... ▶

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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

### A. Unfiltered Media LLC

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	5		2	0	2	3

Mailing Address 2663 Manhattan Place  
#102

City Vienna State VA Zip Code 22180

Purpose of Disbursement  
Payroll Processing Fees

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.35871  
Amount of Each Disbursement this Period

[REDACTED] 595.04

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Memo Item

Full Name (Last, First, Middle Initial)

### B. Unfiltered Media LLC

Date of Disbursement

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

Mailing Address 2663 Manhattan Place  
#102

City Vienna State VA Zip Code 22180

Purpose of Disbursement  
Payroll

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.35873  
Amount of Each Disbursement this Period

[REDACTED] 3118.93

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Memo Item

Full Name (Last, First, Middle Initial)

### C. Stahr, Morgan, , ,

Date of Disbursement

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

Mailing Address 515 S Poplar St

City Hazleton State PA Zip Code 18201

Purpose of Disbursement  
Payroll

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.35873  
Amount of Each Disbursement this Period

[REDACTED] 3118.93

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Memo Item

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

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

[REDACTED] 3713.97

[REDACTED]



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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Unfiltered Media LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 2663 Manhattan Place #102

City Vienna State VA Zip Code 22180

Purpose of Disbursement Payroll Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 06 / 26 / 2023

FEC Identification Number: C

Transaction ID : SB21B.35874

Amount of Each Disbursement this Period: 600.00

Memo Item

**B. Wegener, Kaili L., , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 655 University Place Room 211

City Evanston State IL Zip Code 60201

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 04 / 12 / 2023

FEC Identification Number: C

Transaction ID : SB21B.35965

Amount of Each Disbursement this Period: 225.00

Memo Item

**C. Zoom Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 55 Almaden Boulevard 6th Floor

City San Jose State CA Zip Code 95113

Purpose of Disbursement Software

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 04 / 03 / 2023

FEC Identification Number: C

Transaction ID : SB21B.35835

Amount of Each Disbursement this Period: 67.80

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 892.80

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Zoom Inc.</b>		Date of Disbursement MM / DD / YYYY 05 / 02 / 2023
Mailing Address 55 Almaden Boulevard 6th Floor		FEC Identification Number C <b>Transaction ID : SB21B.35847</b> Amount of Each Disbursement this Period 67.80
City San Jose	State CA	
Purpose of Disbursement Software	Zip Code 95113	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Zoom Inc.</b>		Date of Disbursement MM / DD / YYYY 05 / 31 / 2023
Mailing Address 55 Almaden Boulevard 6th Floor		FEC Identification Number C <b>Transaction ID : SB21B.35860</b> Amount of Each Disbursement this Period 317.79
City San Jose	State CA	
Purpose of Disbursement Software	Zip Code 95113	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C
City	State	
Purpose of Disbursement	Zip Code	Amount of Each Disbursement this Period
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>
State: District:		

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

385.59

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

103114.21

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

**A.** Full Name (Last, First, Middle Initial)  
**Sperling, Eva and Ed, , ,**

Mailing Address 120 Lyncroft Road

City New Rochelle State NY Zip Code 10804

Purpose of Disbursement Refund - 12-9-2022 Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
01 / 04 / 2023

FEC Identification Number: C

Transaction ID : SB28A.34370

Amount of Each Disbursement this Period: 500.00

Memo Item

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	500.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Barbosa, Andre F., , ,</b>		Date of Disbursement MM / DD / YYYY 03 / 27 / 2023	
Mailing Address 10101 Hampton Road		FEC Identification Number C [REDACTED] <b>Transaction ID : SB29.35879</b> Amount of Each Disbursement this Period [REDACTED] 150.00	
City Fairfax Station	State VA	Zip Code 22039	Category/ Type [REDACTED]
Purpose of Disbursement Strategic Consulting - IE Only Account		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Bill.com</b>		Date of Disbursement MM / DD / YYYY 04 / 18 / 2023	
Mailing Address 6220 America Center Drive Suite 100		FEC Identification Number C [REDACTED] <b>Transaction ID : SB29.35784</b> Amount of Each Disbursement this Period [REDACTED] 95.11	
City San Jose	State CA	Zip Code 95002	Category/ Type [REDACTED]
Purpose of Disbursement Payment Processing Fee - IE Only Account		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Bill.com</b>		Date of Disbursement MM / DD / YYYY 05 / 18 / 2023	
Mailing Address 6220 America Center Drive Suite 100		FEC Identification Number C [REDACTED] <b>Transaction ID : SB29.35789</b> Amount of Each Disbursement this Period [REDACTED] 51.86	
City San Jose	State CA	Zip Code 95002	Category/ Type [REDACTED]
Purpose of Disbursement Payment Processing Fee - IE Only Account		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 296.97
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

### A. Bill.com

Mailing Address 6220 America Center Drive  
Suite 100

City San Jose State CA Zip Code 95002

Purpose of Disbursement  
Payment Processing Fee - IE Only Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 21 / 2023

FEC Identification Number

C

Transaction ID : SB29.35792

Amount of Each Disbursement this Period

50.30

Memo Item

Full Name (Last, First, Middle Initial)

### B. Blue Bonnett Data

Mailing Address 988 Memorial Dr.  
#181

City Cambridge State MA Zip Code 02138

Purpose of Disbursement  
Data Consulting - IE Only Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 07 / 2023

FEC Identification Number

C

Transaction ID : SB29.35777

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

### C. Boykin, Jordan A., , ,

Mailing Address 7922 Wolfield Lane

City Houston State TX Zip Code 77071

Purpose of Disbursement  
Strategic Consulting - IE Only Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 27 / 2023

FEC Identification Number

C

Transaction ID : SB29.35883

Amount of Each Disbursement this Period

150.00

Memo Item

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

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

700.30

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

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

Full Name (Last, First, Middle Initial)

Mailing Address 5110 Cool Hill Rd

City Providence Forge State VA Zip Code 23140

Purpose of Disbursement Strategic Consulting - IE Only Account

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 03 / 2023

FEC Identification Number: C

Transaction ID : SB29.35744

Amount of Each Disbursement this Period: 250.00

Memo Item

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

Full Name (Last, First, Middle Initial)

Mailing Address 5110 Cool Hill Rd

City Providence Forge State VA Zip Code 23140

Purpose of Disbursement Strategic Consulting - IE Only Account

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 04 / 2023

FEC Identification Number: C

Transaction ID : SB29.35746

Amount of Each Disbursement this Period: 500.00

Memo Item

**C. Chaidez Zamora, Dulce M., , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 5205 Genesee Cove Apt.15

City San Diego State CA Zip Code 92122

Purpose of Disbursement Strategic Consulting - IE Only Account

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 27 / 2023

FEC Identification Number: C

Transaction ID : SB29.35886

Amount of Each Disbursement this Period: 75.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 825.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

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

Full Name (Last, First, Middle Initial) <b>A. Chaidez Zamora, Dulce M., , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 12 / 2023
Mailing Address 5205 Genesee Cove Apt.15		FEC Identification Number C [ ] <b>Transaction ID : SB29.35779</b>
City San Diego	State CA	Zip Code 92122
Purpose of Disbursement Strategic Consulting - IE Only Account		Amount of Each Disbursement this Period [ ] 225.00
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Crichlow, Glorianna, , ,</b>		Date of Disbursement MM / DD / YYYY 03 / 27 / 2023
Mailing Address 14 Monson Street		FEC Identification Number C [ ] <b>Transaction ID : SB29.35888</b>
City Johnston	State RI	Zip Code 02919
Purpose of Disbursement Strategic Consulting - IE Only Account		Amount of Each Disbursement this Period [ ] 150.00
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. Darrow, Lydia D., , ,</b>		Date of Disbursement MM / DD / YYYY 03 / 27 / 2023
Mailing Address 370 Riverside Drive 7D		FEC Identification Number C [ ] <b>Transaction ID : SB29.35891</b>
City New York	State NY	Zip Code 10025
Purpose of Disbursement Strategic Consulting - IE Only Account		Amount of Each Disbursement this Period [ ] 150.00
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 525.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**YOUTH PROGRESSIVE ACTION CATALYST**

Full Name (Last, First, Middle Initial)

**A. Dials, Jacob D., , ,**

Mailing Address 41335 West Laramie Rd

City  
Maricopa

State  
AZ

Zip Code  
85138

Purpose of Disbursement  
Strategic Consulting - IE Only Account

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	27	/	2023

FEC Identification Number

**C**

**Transaction ID : SB29.35895**

Amount of Each Disbursement this Period

150.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Dondeti, Ridhi R., , ,**

Mailing Address 6559 Red Cedar Way

City  
Carmel

State  
IN

Zip Code  
46033

Purpose of Disbursement  
Strategic Consulting - IE Only Account

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	27	/	2023

FEC Identification Number

**C**

**Transaction ID : SB29.35899**

Amount of Each Disbursement this Period

150.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Duncan-High, Ella K., , ,**

Mailing Address 6016 Marilyn Drive

City  
Alexandria

State  
VA

Zip Code  
22310

Purpose of Disbursement  
Strategic Consulting - IE Only Account

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	27	/	2023

FEC Identification Number

**C**

**Transaction ID : SB29.35903**

Amount of Each Disbursement this Period

150.00

Memo Item

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

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

450.00



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. English, Kate E., , ,**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	7		2	0	2	3

Mailing Address 101 N Merion Ave  
Box #356

City Bryn Mawr State PA Zip Code 19010

Purpose of Disbursement  
Strategic Consulting - IE Only Account

FEC Identification Number

C [ ]

Transaction ID : **SB29.35907**  
Amount of Each Disbursement this Period

[ ] 150.00

Candidate Name

Category/  
Type

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

Memo Item

Full Name (Last, First, Middle Initial)

**B. Ganemtare, Yasmine A., , ,**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	7		2	0	2	3

Mailing Address 196 Benton Ave

City Staten Island State NY Zip Code 10305

Purpose of Disbursement  
Strategic Consulting - IE Only Account

FEC Identification Number

C [ ]

Transaction ID : **SB29.35911**  
Amount of Each Disbursement this Period

[ ] 150.00

Candidate Name

Category/  
Type

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

Memo Item

Full Name (Last, First, Middle Initial)

**C. Google**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	5		2	0	2	3

Mailing Address 1600 Amphitheatre Parkway

City Mountain View State CA Zip Code 94043

Purpose of Disbursement  
Technology Fee - IE Only Account

FEC Identification Number

C [ ]

Transaction ID : **SB29.35791**  
Amount of Each Disbursement this Period

[ ] 25.44

Candidate Name

Category/  
Type

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

Memo Item

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

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

[ ] 325.44

[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Guthman, Nick, , ,</b>		Date of Disbursement MM / DD / YYYY 01 / 03 / 2023	
Mailing Address 10913 Lindblade St.		FEC Identification Number C [REDACTED] <b>Transaction ID : SB29.35745</b> Amount of Each Disbursement this Period [REDACTED] 379.61	
City Culver City	State CA	Zip Code 90230	Category/ Type [REDACTED]
Purpose of Disbursement Strategic Consulting - IE Only Account		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. Guthman, Nick, , ,</b>		Date of Disbursement MM / DD / YYYY 03 / 03 / 2023	
Mailing Address 10913 Lindblade St.		FEC Identification Number C [REDACTED] <b>Transaction ID : SB29.35764</b> Amount of Each Disbursement this Period [REDACTED] 358.62	
City Culver City	State CA	Zip Code 90230	Category/ Type [REDACTED]
Purpose of Disbursement Strategic Consulting - IE Only Account		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. Guthman, Nick, , ,</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2023	
Mailing Address 10913 Lindblade St.		FEC Identification Number C [REDACTED] <b>Transaction ID : SB29.35770</b> Amount of Each Disbursement this Period [REDACTED] 3154.00	
City Culver City	State CA	Zip Code 90230	Category/ Type [REDACTED]
Purpose of Disbursement Strategic Consulting - IE Only Account		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 3892.23
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Kitariev, Abbie S., , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 1600 S Eads St  
1204N

City Arlington State VA Zip Code 22202

Purpose of Disbursement Strategic Consulting - IE Only Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 03 / 27 / 2023

FEC Identification Number: C

Transaction ID : SB29.35918

Amount of Each Disbursement this Period: 150.00

Memo Item

**B. L'Bahy, Nadia, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 46 Marshall Street  
Apt 3

City Somerville State MA Zip Code 02145

Purpose of Disbursement Strategic Consulting - IE Only Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 03 / 27 / 2023

FEC Identification Number: C

Transaction ID : SB29.35925

Amount of Each Disbursement this Period: 150.00

Memo Item

**C. Lanne, Mac-Olivier, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 1588 President Street  
Apt 23

City Brooklyn State NY Zip Code 11213

Purpose of Disbursement Strategic Consulting - IE Only Account

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 03 / 27 / 2023

FEC Identification Number: C

Transaction ID : SB29.35921

Amount of Each Disbursement this Period: 150.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 450.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Leko, Marija, , ,**

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM / DD / YYYY  
03 / 27 / 2023

Mailing Address: 10295 48th Avenue, apt i101  
1 campus drive

City: Allendale State: MI Zip Code: 49401

Purpose of Disbursement: Strategic Consulting - IE Only Account

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President  
State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:  Primary  General  Other (specify) ▼

FEC Identification Number: **C**

Transaction ID : **SB29.35929**

Amount of Each Disbursement this Period: 150.00

Memo Item

**B. Loyd, Tahm, , ,**

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM / DD / YYYY  
03 / 27 / 2023

Mailing Address: 7719 Countryside Dr.

City: Bloomington State: MN Zip Code: 55438

Purpose of Disbursement: Strategic Consulting - IE Only Account

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President  
State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:  Primary  General  Other (specify) ▼

FEC Identification Number: **C**

Transaction ID : **SB29.35932**

Amount of Each Disbursement this Period: 150.00

Memo Item

**C. Mehta, Sage P., , ,**

Full Name (Last, First, Middle Initial)

Date of Disbursement: MM / DD / YYYY  
01 / 03 / 2023

Mailing Address: 3650 Spruce Street

City: Philadelphia State: PA Zip Code: 19104

Purpose of Disbursement: Strategic Consulting - IE Only Account

Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President  
State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:  Primary  General  Other (specify) ▼

FEC Identification Number: **C**

Transaction ID : **SB29.35743**

Amount of Each Disbursement this Period: 250.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 550.00

**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)

Grid for line numbers 21b-30b with checkboxes, where 29 is checked.

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NAME OF COMMITTEE (In Full)
YOUTH PROGRESSIVE ACTION CATALYST

Form for A. Mehta, Sage P., including fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

Form for B. Mehta, Sage P., including fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

Form for C. Mejorada Sesma, David A., including fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

SUBTOTAL of Disbursements This Page (optional) 650.00
TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Obioha, Eneanya C., , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 5209 Spurr Terr

City Ellicott City State MD Zip Code 21043

Purpose of Disbursement Strategic Consulting - IE Only Account

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 03 / 27 / 2023

FEC Identification Number C

Transaction ID : SB29.35939

Amount of Each Disbursement this Period 150.00

Memo Item

**B. Patel, Prisha P., , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 7053 Post Preserve Blvd

City Dublin State OH Zip Code 43016

Purpose of Disbursement Strategic Consulting - IE Only Account

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 03 / 27 / 2023

FEC Identification Number C

Transaction ID : SB29.35942

Amount of Each Disbursement this Period 150.00

Memo Item

**C. Portela, Katia, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 4333 Nebraska Avenue NW

City Washington State DC Zip Code 20016

Purpose of Disbursement Strategic Consulting - IE Only Account

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 03 / 27 / 2023

FEC Identification Number C

Transaction ID : SB29.35946

Amount of Each Disbursement this Period 150.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 450.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. Sandler, Reiff, Lamb, Rosenstein & Birkenstock, PC**

Date of Disbursement

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

Mailing Address 1090 Vermont Ave. NW  
Suite 750

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Legal Services - IE Only Account

FEC Identification Number

C	Transaction ID : <b>SB29.35762</b> Amount of Each Disbursement this Period <b>450.00</b>
---	--

Candidate Name

Category/  
Type

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

Memo Item

Full Name (Last, First, Middle Initial)

**B. Siddiqui, Aaeshah F., , ,**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	3		2	7		2	0	2	3		

Mailing Address 74 Timberview Dr.

City Rochester Hills State MI Zip Code 48307

Purpose of Disbursement  
Strategic Consulting - IE Only Account

FEC Identification Number

C	Transaction ID : <b>SB29.35950</b> Amount of Each Disbursement this Period <b>150.00</b>
---	--

Candidate Name

Category/  
Type

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

Memo Item

Full Name (Last, First, Middle Initial)

**C. Singh, Jessica P., , ,**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	3		2	7		2	0	2	3		

Mailing Address 4815 Pennel Ct

City Stockton State CA Zip Code 95206

Purpose of Disbursement  
Strategic Consulting - IE Only Account

FEC Identification Number

C	Transaction ID : <b>SB29.35953</b> Amount of Each Disbursement this Period <b>150.00</b>
---	--

Candidate Name

Category/  
Type

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

Memo Item

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

750.00
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**TOTAL** This Period (last page this line number only)..... ▶

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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

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

Full Name (Last, First, Middle Initial)

Mailing Address 515 S Poplar St

City Hazleton State PA Zip Code 18201

Purpose of Disbursement Strategic Consulting - IE Only Account

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 13 / 2023

FEC Identification Number: C

Transaction ID : SB29.35750

Amount of Each Disbursement this Period: 1995.00

Memo Item

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

Full Name (Last, First, Middle Initial)

Mailing Address 515 S Poplar St

City Hazleton State PA Zip Code 18201

Purpose of Disbursement Strategic Consulting - IE Only Account

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 18 / 2023

FEC Identification Number: C

Transaction ID : SB29.35755

Amount of Each Disbursement this Period: 3154.00

Memo Item

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

Full Name (Last, First, Middle Initial)

Mailing Address 515 S Poplar St

City Hazleton State PA Zip Code 18201

Purpose of Disbursement Strategic Consulting - IE Only Account

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 15 / 2023

FEC Identification Number: C

Transaction ID : SB29.35769

Amount of Each Disbursement this Period: 3154.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 8303.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Stahr, Morgan, , ,</b>		Date of Disbursement MM / DD / YYYY 04 / 12 / 2023	
Mailing Address 515 S Poplar St		FEC Identification Number C [ ] <b>Transaction ID : SB29.35782</b> Amount of Each Disbursement this Period [ ] 3154.00	
City Hazleton	State PA	Zip Code 18201	Category/ Type [ ]
Purpose of Disbursement Strategic Consulting - IE Only Account		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Strachn, Christina M., , ,</b>		Date of Disbursement MM / DD / YYYY 03 / 27 / 2023	
Mailing Address 47 N Bleeker St Apt 3R 3R		FEC Identification Number C [ ] <b>Transaction ID : SB29.35957</b> Amount of Each Disbursement this Period [ ] 150.00	
City Mount Vernon	State NY	Zip Code 10550	Category/ Type [ ]
Purpose of Disbursement Strategic Consulting - IE Only Account		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Thompson, Kaliyah J., , ,</b>		Date of Disbursement MM / DD / YYYY 03 / 27 / 2023	
Mailing Address 6056 Kindling Court		FEC Identification Number C [ ] <b>Transaction ID : SB29.35961</b> Amount of Each Disbursement this Period [ ] 150.00	
City Lancaster	State CA	Zip Code 93536	Category/ Type [ ]
Purpose of Disbursement Strategic Consulting - IE Only Account		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 3454.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Unfiltered Media LLC</b>		Date of Disbursement MM / DD / YYYY 04 / 07 / 2023
Mailing Address 2663 Manhattan Place #102		FEC Identification Number C [ ] <b>Transaction ID : SB29.35776</b>
City Vienna	State VA	Zip Code 22180
Purpose of Disbursement Digital Consulting - IE Only Account		Amount of Each Disbursement this Period [ ] 400.00
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Wegener, Kaili L., , ,</b>		Date of Disbursement MM / DD / YYYY 03 / 27 / 2023
Mailing Address 655 University Place Room 211		FEC Identification Number C [ ] <b>Transaction ID : SB29.35964</b>
City Evanston	State IL	Zip Code 60201
Purpose of Disbursement Strategic Consulting - IE Only Account		Amount of Each Disbursement this Period [ ] 75.00
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C [ ]
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period [ ]
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	475.00
<b>TOTAL</b> This Period (last page this line number only).....▶	25705.16