



**SUMMARY PAGE**

of Receipts and Disbursements

Write or Type Committee Name

---

Report Covering the Period: From: M 08 / D 04 / Y 2022 To: M 09 / D 30 / Y 2022

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)) ....	1 3 1 7 . 0 0	2 4 5 4 9 8 . 4 7
(b) Total Contribution Refunds (from Line 20(d)) .....	3 0 4 . 4 4	1 3 7 1 6 . 1 4
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	1 0 1 2 . 5 6	2 3 1 7 8 2 . 3 3
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	1 0 6 7 . 5 6	2 3 2 3 2 0 . 2 8
(b) Total Offsets to Operating Expenditures (from Line 14) .....	0 . 0 0	9 6 5 . 0 6
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	1 0 6 7 . 5 6	2 3 1 3 5 5 . 2 2
8. Cash on Hand at Close of Reporting Period (from Line 27) .....	4 2 7 . 1 1	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....	0 . 0 0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....	4 2 1 4 . 1 1	

**For further information contact:**

Federal Election Commission  
1050 First Street, N.E.  
Washington, DC 20463

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

2025 RELEASE UNDER E.O. 14176

**DETAILED SUMMARY PAGE**

FEC Form 3 (Revised 05/2016)

of Receipts

Page 3

Write or Type Committee Name

Report Covering the Period: From: M<sup>08</sup> / D<sup>04</sup> / Y<sup>2022</sup> To: M<sup>09</sup> / D<sup>30</sup> / Y<sup>2022</sup>

**I. RECEIPTS**

**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

- (a) Individuals/Persons Other Than Political Committees
  - (i) Itemized (use Schedule A) .....
  - (ii) Unitemized .....
  - (iii) TOTAL of contributions from individuals ▶
- (b) Political Party Committees .....
- (c) Other Political Committees (such as PACs) .....
- (d) The Candidate .....
- (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

1 0 0 . 0 0  
2 1 7 . 0 0  
3 1 7 . 0 0  
0 . 0 0  
0 . 0 0  
1 0 0 0 . 0 0  
1 3 1 7 . 0 0

1 9 0 7 3 6 . 3 5  
4 3 8 5 9 . 1 2  
2 3 4 5 9 5 . 4 7  
0 . 0 0  
6 0 0 0 . 0 0  
4 9 0 3 . 0 0  
2 4 5 4 9 8 . 4 7

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....

0 . 0 0

0 . 0 0

13. LOANS:

- (a) Made or Guaranteed by the Candidate.....
- (b) All Other Loans.....
- (c) TOTAL LOANS (add Lines 13(a) and (b)).....

0 . 0 0  
0 . 0 0  
0 . 0 0

0 . 0 0  
0 . 0 0  
0 . 0 0

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....

0 . 0 0

9 6 5 . 0 6

15. OTHER RECEIPTS (Dividends, Interest, etc.) .....

0 . 0 0

0 . 0 0

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

1 3 1 7 . 0 0

2 4 6 4 6 3 . 5 3

NON-FUNCTIONAL

**DETAILED SUMMARY PAGE**  
of Disbursements

**II. DISBURSEMENTS**

**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	1 0 6 7 . 5 6	2 3 2 3 2 0 . 2 8
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0 . 0 0	0 . 0 0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0 . 0 0	0 . 0 0
(b) Of All Other Loans.....	0 . 0 0	0 . 0 0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0 . 0 0	0 . 0 0
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	3 0 4 . 4 4	1 1 7 1 6 . 1 4
(b) Political Party Committees.....	0 . 0 0	0 . 0 0
(c) Other Political Committees (such as PACs).....	0 . 0 0	2 0 0 0 . 0 0
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	3 0 4 . 4 4	1 3 7 1 6 . 1 4
21. OTHER DISBURSEMENTS.....	0 . 0 0	0 . 0 0
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	1 3 7 2 . 0 0	2 4 6 0 3 6 . 4 2

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	4 8 2 . 1 1
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	1 3 1 7 . 0 0
25. SUBTOTAL (add Line 23 and Line 24).....	1 7 9 9 . 1 1
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	1 3 7 2 . 0 0
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	4 2 7 . 1 1

2025 RELEASE UNDER E.O. 14176

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 5 OF 12	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
				<input type="checkbox"/> 15

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)  
**Ashmi for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Nolan, Sean**

Mailing Address  
**206 W 99th Street Apt 2B**

City **New York** State **NY** Zip Code **10025**

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

Name of Employer **EY** Occupation **Accountant**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date  
**3 5 0 . 0 0**

Date of Receipt  
**08 / 14 / 2022**

Amount of Each Receipt this Period  
**2 5 . 0 0**

Memo Item

\* Earmarked Contribution: See Below

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

Mailing Address  
**PO Box 441146**

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

FEC ID number of contributing federal political committee. **C 0 0 4 0 1 2 2 4**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date  
**6 5 3 . 0 0**

Date of Receipt  
**08 / 13 / 2022**

Amount of Each Receipt this Period  
**2 5 . 0 0**

Memo Item

Note: Above Contribution earmarked through this organization.

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

Mailing Address  
**1115 Morse St NE**

City **Washington** State **DC** Zip Code **20002**

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

Name of Employer **Smerf** Occupation **Software Engineer**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date  
**2 7 5 . 0 0**

Date of Receipt  
**08 / 26 / 2022**

Amount of Each Receipt this Period  
**2 5 . 0 0**

Memo Item

\* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional) ..... **5 0 . 0 0**

**TOTAL** This Period (last page this line number only) ..... **5 0 . 0 0**

NON-FEDERAL ORGANIZATION

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

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

FOR LINE NUMBER: PAGE 6 OF 12  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Ashmi for Congress**

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

Mailing Address  
**PO Box 441146**

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

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date  
**653.00**

Date of Receipt  
**08 / 26 / 2022**

Amount of Each Receipt this Period  
**25.00**

Memo Item

Note: Above Contribution earmarked through this organization.

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

Mailing Address  
**1970 Saddleback Dr**

City **Goodlettsville** State **TN** Zip Code **37072**

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

Name of Employer Occupation  
**Not Employed Humanitarian Aid**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date  
**350.00**

Date of Receipt  
**08 / 28 / 2022**

Amount of Each Receipt this Period  
**25.00**

Memo Item

\* Earmarked Contribution: See Below

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

Mailing Address  
**PO Box 441146**

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

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date  
**653.00**

Date of Receipt  
**08 / 28 / 2022**

Amount of Each Receipt this Period  
**25.00**

Memo Item

Note: Above Contribution earmarked through this organization.

**SUBTOTAL** of Receipts This Page (optional) ..... **25.00**

**TOTAL** This Period (last page this line number only) ..... **25.00**

NON-FUNCTIONAL DOCUMENT

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

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

FOR LINE NUMBER: PAGE 7 OF 12  
(check only one)  
 11a  11b  11c  11d  15  
 12  13a  13b  14

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NAME OF COMMITTEE (In Full)  
**Ashmi for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Hodgson, Eliot**

Mailing Address  
**239 Brooklyn Ave**

City **Brooklyn** State **NY** Zip Code **11213**

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

Name of Employer **Self Employed** Occupation **Developer**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date  
**5 5 0 . 0 0**

Date of Receipt  
**09 / 02 / 2022**

Amount of Each Receipt this Period  
**2 5 . 0 0**

Memo Item

\* Earmarked Contribution: See Below

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

Mailing Address  
**PO Box 441146**

City **Brooklyn** State **NY** Zip Code **02144-0031**

FEC ID number of contributing federal political committee. **C 0 0 4 0 1 2 2 4**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date  
**6 5 3 . 0 0**

Date of Receipt  
**09 / 04 / 2022**

Amount of Each Receipt this Period  
**2 5 . 0 0**

Memo Item

Note: Above Contribution earmarked through this organization.

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

Memo Item

**SUBTOTAL** of Receipts This Page (optional) ..... **2 5 . 0 0**

**TOTAL** This Period (last page this line number only) ..... **3 1 7 . 0 0**

NONPROFIT CORPORATION

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

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

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NAME OF COMMITTEE (In Full)  
**Ashmi for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Sheth, Ashmi**

Mailing Address  
**341 West 45th Street Apt 211**

City **New York** State **NY** Zip Code

FEC ID number of contributing federal political committee. **CH2NY10126**

Name of Employer **Not Employed** Occupation **Not Employed**

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**4903.00**

Date of Receipt  
**08 / 09 / 2022**

Amount of Each Receipt this Period  
**1000.00**

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>4903.00</b>

NON-PROFIT ORGANIZATION



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

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

FOR LINE NUMBER:  
(check only one)

17 20a     18 20b     19a 20c     19b 21

Ty

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NAME OF COMMITTEE (In Full)  
**Ashmi for Congress**

**A. ActBlue**

Full Name (Last, First, Middle Initial)  
Mailing Address  
**PO Box 441146**

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

Purpose of Disbursement  
**Credit Processing Fees**

Candidate Name \_\_\_\_\_ Category/Type \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: **08 / 31 / 2022**

FEC Identification Number: **C 0 0 4 0 1 2 2 4**

Amount of Each Disbursement this Period: **1 0 . 8 5**

Memo Item

**B. Actblue**

Full Name (Last, First, Middle Initial)  
Mailing Address  
**PO Box 441146**

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

Purpose of Disbursement  
**Credit Processing Fees**

Candidate Name \_\_\_\_\_ Category/Type \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: **09 / 30 / 2022**

FEC Identification Number: **C 0 0 4 0 1 2 2 4**

Amount of Each Disbursement this Period: **1 . 7 1**

Memo Item

**C. Amalgamated Bank**

Full Name (Last, First, Middle Initial)  
Mailing Address  
**275 7th Ave**

City **New York** State **NY** Zip Code **10001-6708**

Purpose of Disbursement  
**Bank Charges & Fees**

Candidate Name \_\_\_\_\_ Category/Type \_\_\_\_\_

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Date of Disbursement: **09 / 30 / 2022**

FEC Identification Number: **C**

Amount of Each Disbursement this Period: **5 5 . 0 0**

Memo Item

**SUBTOTAL** of Disbursements This Page (optional) ..... **6 7 . 5 6**

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

2025 RELEASE UNDER E.O. 14176

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Ashmi for Congress

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM	DD	YYYY
08	09	2022

**A.** Progressives Consulting LLC

Mailing Address  
PO Box 61646

City: Las Vegas      State: NV      Zip Code: 89160-1646

Purpose of Disbursement  
Accounting/Compliance Expense

Category/Type
C

FEC Identification Number

FEC ID Number
C

Amount of Each Disbursement this Period

Amount
1 0 0 0 . 0 0

Candidate Name

Category/Type
C

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

Memo Item

State:      District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM	DD	YYYY

**B.**

Mailing Address

City:      State:      Zip Code:

Purpose of Disbursement

Category/Type
C

FEC Identification Number

FEC ID Number
C

Amount of Each Disbursement this Period

Amount

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

Memo Item

State:      District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM	DD	YYYY

**C.**

Mailing Address

City:      State:      Zip Code:

Purpose of Disbursement

Category/Type
C

FEC Identification Number

FEC ID Number
C

Amount of Each Disbursement this Period

Amount

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

Memo Item

State:      District:

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

Subtotal
1 0 0 0 . 0 0

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

Total
1 0 6 7 . 5 6

2025 RELEASE UNDER E.O. 14176

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**Ashmi for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Progressives Consulting LLC</b>			Nature of Debt (Purpose): <b>Accounting/Compliance Expense</b>
Mailing Address <b>PO Box 441146</b>			
City <b>Las Vegas</b>	State <b>NV</b>	Zip Code <b>89160-1646</b>	

Outstanding Balance Beginning This Period <b>1 1 1 4 . 1 1</b>	Amount Incurred This Period <b>0 . 0 0</b>	Payment This Period <b>0 . 0 0</b>	Outstanding Balance at Close of This Period <b>1 1 1 4 . 1 1</b>
---	---	---------------------------------------	---

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Progressives Consulting LLC</b>			Nature of Debt (Purpose): <b>Accounting/Compliance Expense</b>
Mailing Address <b>PO Box 441146</b>			
City <b>Las Vegas</b>	State <b>NV</b>	Zip Code <b>89160-1646</b>	

Outstanding Balance Beginning This Period <b>4 5 0 . 0 0</b>	Amount Incurred This Period <b>0 . 0 0</b>	Payment This Period <b>0 . 0 0</b>	Outstanding Balance at Close of This Period <b>4 5 0 . 0 0</b>
---	---	---------------------------------------	---

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Progressives Consulting LLC</b>			Nature of Debt (Purpose): <b>Accounting/Compliance Expense</b>
Mailing Address <b>PO Box 441146</b>			
City <b>Las Vegas</b>	State <b>NV</b>	Zip Code <b>89160-1646</b>	

Outstanding Balance Beginning This Period <b>0 . 0 0</b>	Amount Incurred This Period <b>1 2 0 0 . 0 0</b>	Payment This Period <b>1 0 0 0 . 0 0</b>	Outstanding Balance at Close of This Period <b>2 0 0 . 0 0</b>
---	---	---	---

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<b>1 7 6 4 . 1 1</b>
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	

NON-FUNCTIONAL DOCUMENT

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

Ashmi for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Progressives Consulting LLC

Nature of Debt (Purpose):

Accounting/Compliance Expense

Mailing Address

PO Box 441146

City

Las Vegas

State

NV

Zip Code

89160-1646

Outstanding Balance Beginning This Period

0.00

Amount Incurred This Period

1450.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1450.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional) ▶

1450.00

2) TOTALS This Period (last page this line number only) ▶

3214.11

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶

0.00

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

3214.11

2025 RELEASE UNDER E.O. 14176

**UNITED STATES** | **PRIORITY**<sup>®</sup>  
**POSTAL SERVICE**<sup>®</sup> | **MAIL**

3rd delivery date specified for domestic use.

International shipments include \$100 of insurance (restrictions apply).\*

Tracking<sup>®</sup> service included for domestic and many international destinations.  
 international insurance.\*\*

Additional international insurance, a customs declaration form is required.

Does not cover certain items. For details regarding claims exclusions see the International Mail Manual at <http://pe.usps.com>.

For details regarding claims exclusions see the International Mail Manual at <http://pe.usps.com> for availability and limitations of coverage.

**FREE RATE ENVELOPE**  
 FOR ANY WEIGHT

**TRACKED & INSURED**

To schedule free Package Pickup, scan the QR code.



5000001000014

EP14F July 2022  
 OD: 12 1/2 x 9 1/2



USPS.COM/PICKUP

**E**

US POSTAGE AND FEES PAID  
 PM EXPRESS  
 Oct 28 2022  
 Mailed from ZIP 92379  
 PRIORITY MAIL EXPRESS  
 ZONE 8 FLAT - RATE ENV.  
 12669930  
 Commercial Plus Pricing



06280001442049

**PRIORITY MAIL EXPRESS 1 - DAY**

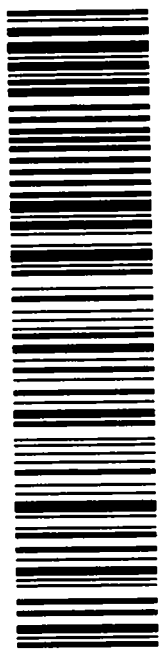
**PROGRESSIVE CONSULTING** C062 0007  
 485 WELLINGTON CIR  
 Corona CA 92879

NO SUNDAY OR HOLIDAY DELIVERY  
 WAIVER OF SIGNATURE REQUESTED

SHIP TO:  
**FEDERAL ELECTION COMMISSION**  
 1050 1ST ST NE  
 WASHINGTON DC 20002 - 4694

*Handwritten signature*  
 10/29

USPS TRACKING #



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