

**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

Fight Back California

ADDRESS (number and street)

1787 Tribute Road, Suite K

Check if different
than previously
reported. (ACC)

Sacramento

CA

95815

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00641183

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

(b) Monthly
Report
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)
(Non-Election
Year Only)
- ☒ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)
(Non-Election
Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

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

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

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

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

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

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

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
02 01 2018

through

M M M / D D D / Y Y Y Y Y Y
02 28 2018

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

Deane, Shawnda, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Deane, Shawnda, , ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
03 20 2018

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

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

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Fight Back California

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y
 02 / 01 / 2018

To:

 M M / D D / Y Y Y Y Y
 02 / 28 / 2018

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2018		31998.60
(b) Cash on Hand at Beginning of Reporting Period.....	36471.50	
(c) Total Receipts (from Line 19)	10363.00	17489.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	46834.50	49487.60
7. Total Disbursements (from Line 31).....	13283.38	15936.48
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	33551.12	33551.12
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	5000.00	



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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Fight Back California

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
02	/	01	/	2018

To:

M M	/	D D	/	Y Y Y Y
02	/	28	/	2018

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

6520.00

12040.00

(ii) Unitemized

3843.00

5449.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

10363.00

17489.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

10363.00

17489.00

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))

10363.00

17489.00

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

10363.00

17489.00

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	13283.38	15936.48
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	13283.38	15936.48
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	13283.38	15936.48
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	13283.38	15936.48

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	10363.00	17489.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10363.00	17489.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	13283.38	15936.48
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	13283.38	15936.48

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 36

(check only one)

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

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NAME OF COMMITTEE (In Full)

Fight Back California

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

A. Avery, Judy, , ,

Mailing Address 2222 Hyde Street

City
San FranciscoState
CAZip Code
94109FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/aOccupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1540.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 11 / 2018
Transaction ID : IDTA415

Amount of Each Receipt this Period

770.00

☐ Memo Item

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

B. ActBlue

Mailing Address 14 Arrow Street

City
CambridgeState
MAZip Code
02138FEC 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 ▼

15739.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 11 / 2018
Transaction ID : INCA181IDTA415

Amount of Each Receipt this Period

770.00

☒ Memo Item

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

C. Burt, Patrick, , ,

Mailing Address 1249 Harriet Street

City
Palo AltoState
CAZip Code
94301FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Theradep TechnologiesOccupation (for Individual)
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 19 / 2018
Transaction ID : IDTA486

Amount of Each Receipt this Period

250.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1020.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SA11AI

Transaction ID : IDTA415

Earmarked through ActBlue

Form/Schedule: SA11AI

Transaction ID: INCA181IDTA415

Total earmarked through conduit PAC limit not affected

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB
.

Form/Schedule: SA11AI

Transaction ID : IDTA486

Earmarked Through Actblue

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 9 OF 36

(check only one)

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

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NAME OF COMMITTEE (In Full)

Fight Back California

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

A. ActBlue

Mailing Address 14 Arrow Street

City
Cambridge

State
MA

Zip Code
02138

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 ▼

15739.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 25 / 2018

Transaction ID : INCA209IDTA486

Amount of Each Receipt this Period

250.00

☒ Memo Item

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

B. Folger, Barbara, , ,

Mailing Address 3755 Jackson Street

City

San Francisco

State
CA

Zip Code
94118

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 08 / 2018

Transaction ID : IDTA422

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

C. ActBlue

Mailing Address 14 Arrow Street

City

Cambridge

State
MA

Zip Code
02138

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 ▼

15739.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 11 / 2018

Transaction ID : INCA181IDTA422

Amount of Each Receipt this Period

500.00

☒ Memo Item

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

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

500.00

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB
.

Form/Schedule: SA11AI

Transaction ID : INCA209IDTA486

Total Earmarked Through Conduit PAC Limit Not Affected

Form/Schedule: SA11AI

Transaction ID: IDTA422

Earmarked through ActBlue

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB
.

Form/Schedule: SA11AI

Transaction ID : INCA181IDTA422

Total earmarked through conduit PAC limit not affected

Form/Schedule:

Transaction ID:

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 36

(check only one)

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

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NAME OF COMMITTEE (In Full)

Fight Back California

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

A. Gosliner, Wendi, , ,

Mailing Address 667 Chetwood Street

City
Oakland

State
CA

Zip Code
94610

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

University of California

Occupation (for Individual)

Public Health Research and Education

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

02 / 10 / 2018

Transaction ID : IDTA425

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

B. ActBlue

Mailing Address 14 Arrow Street

City

Cambridge

State

MA

Zip Code

02138

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 ▼

15739.00

Date of Receipt

02 / 11 / 2018

Transaction ID : INCA181IDTA425

Amount of Each Receipt this Period

500.00

☒ Memo Item

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

C. Hecht, Kenneth, , ,

Mailing Address 29 Plaza Drive

City

Berkeley

State

CA

Zip Code

94705

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Nutrition Policy Institute

Occupation (for Individual)

Director of Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

02 / 12 / 2018

Transaction ID : IDTA469

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

750.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SA11AI

Transaction ID : IDTA425

Earmarked through ActBlue

Form/Schedule: SA11AI

Transaction ID: INCA181IDTA425

Total earmarked through conduit PAC limit not affected

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SA11AI

Transaction ID : IDTA469

Earmarked Through Actblue

Form/Schedule:

Transaction ID:

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 15 OF 36
(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)

Fight Back California

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

A. ActBlue

Mailing Address 14 Arrow Street

City
CambridgeState
MAZip Code
02138FEC 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 ▼

15739.00

Date of Receipt

M M	D D	Y Y Y Y
02	18	2018

Transaction ID : INCA183IDTA469

Amount of Each Receipt this Period

250.00

☒ Memo Item

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

B. Hillier, Ken, , ,

Mailing Address 1063 Walker Avenue

City
OaklandState
CAZip Code
94610FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Folger Levin, LLPOccupation (for Individual)
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M	D D	Y Y Y Y
02	10	2018

Transaction ID : IDTA427

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

C. ActBlue

Mailing Address 14 Arrow Street

City
CambridgeState
MAZip Code
02138FEC 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 ▼

15739.00

Date of Receipt

M M	D D	Y Y Y Y
02	11	2018

Transaction ID : INCA181IDTA427

Amount of Each Receipt this Period

500.00

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

500.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SA11AI

Transaction ID : INCA183IDTA469

Total Earmarked Through Conduit PAC Limit Not Affected

Form/Schedule: SA11AI

Transaction ID: IDTA427

Earmarked through ActBlue

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB
.

Form/Schedule: SA11AI

Transaction ID : INCA181IDTA427

Total earmarked through conduit PAC limit not affected

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Fight Back California

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

A. Kisliuk, Laurel, , ,

Mailing Address 369B Third Street, #146

City

San Rafael

State

CA

Zip Code

94901

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Partnership HealthPlan of California

Occupation (for Individual)

Health Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 01 / 2018

Transaction ID : IDTA411

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

B. ActBlue

Mailing Address 14 Arrow Street

City

Cambridge

State

MA

Zip Code

02138

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 ▼

15739.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 04 / 2018

Transaction ID : INCA174IDTA411

Amount of Each Receipt this Period

500.00

☒ Memo Item

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

C. McGeever, Linda, , ,

Mailing Address 191 Durazno Way

City

Portola Valley

State

CA

Zip Code

94028

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

n/a

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 10 / 2018

Transaction ID : IDTA438

Amount of Each Receipt this Period

2000.00

☐ Memo Item

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

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

2500.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SA11AI

Transaction ID : IDTA411

Earmarked Through Actblue

Form/Schedule: SA11AI

Transaction ID: INCA174IDTA411

Total Earmarked Through Conduit PAC Limit Not Affected

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SA11AI

Transaction ID : IDTA438

Earmarked through ActBlue

Form/Schedule:

Transaction ID:

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 36

(check only one)

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

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NAME OF COMMITTEE (In Full)

Fight Back California

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

A. ActBlue

Mailing Address 14 Arrow Street

City
Cambridge

State
MA

Zip Code
02138

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 ▼

15739.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 11 / 2018

Transaction ID : INCA181IDTA438

Amount of Each Receipt this Period

2000.00

☒ Memo Item

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

B. Oana, Stephanie, , ,

Mailing Address 6257 Acacia Avenue

City
Oakland

State
CA

Zip Code
94618

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Stephanie Oana

Occupation (for Individual)
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 10 / 2018

Transaction ID : IDTA441

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

C. ActBlue

Mailing Address 14 Arrow Street

City
Cambridge

State
MA

Zip Code
02138

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 ▼

15739.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 11 / 2018

Transaction ID : INCA181IDTA441

Amount of Each Receipt this Period

500.00

☒ Memo Item

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

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

500.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A-N5HCB
.

Form/Schedule: SA11AI

Transaction ID : INCA181IDTA438

Total earmarked through conduit PAC limit not affected

Form/Schedule: SA11AI

Transaction ID: IDTA441

Earmarked through ActBlue

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB
.

Form/Schedule: SA11AI

Transaction ID : INCA181IDTA441

Total earmarked through conduit PAC limit not affected

Form/Schedule:

Transaction ID:

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 36

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

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NAME OF COMMITTEE (In Full)

Fight Back California

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

A. Serota, Dagmar, , ,

Mailing Address 942 Aquarius Way

City
Oakland

State
CA

Zip Code
94611

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Oakland Public School Libraries

Occupation (for Individual)
Development Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 10 / 2018

Transaction ID : IDTA447

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

B. ActBlue

Mailing Address 14 Arrow Street

City

Cambridge

State

MA

Zip Code

02138

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 ▼

15739.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 11 / 2018

Transaction ID : INCA181IDTA447

Amount of Each Receipt this Period

500.00

☒ Memo Item

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

C. Snook, Ellen, , ,

Mailing Address 5841 Ayala Avenue

City

Oakland

State

CA

Zip Code

94609

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
n/a

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 10 / 2018

Transaction ID : IDTA450

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

750.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SA11AI

Transaction ID : IDTA447

Earmarked through ActBlue

Form/Schedule: SA11AI

Transaction ID: INCA181IDTA447

Total earmarked through conduit PAC limit not affected

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SA11AI

Transaction ID : IDTA450

Earmarked through ActBlue

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 27 OF 36
(check only one)

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

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NAME OF COMMITTEE (In Full)

Fight Back California

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

A. ActBlue

Mailing Address 14 Arrow Street

City
Cambridge

State
MA

Zip Code
02138

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 ▼

15739.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 11 / 2018

Transaction ID : INCA181IDTA450

Amount of Each Receipt this Period

250.00

☒ Memo Item

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

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

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

0.00

6520.00

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB
.

Form/Schedule: SA11AI

Transaction ID : INCA181IDTA450

Total earmarked through conduit PAC limit not affected

Form/Schedule:

Transaction ID:

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

PAGE 29 OF 36

<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)

Fight Back California

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address 14 Arrow Street

City
CambridgeState
MAZip Code
02138Purpose of Disbursement
Merchant Fees

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	4			2	0	1	8		

FEC Identification Number

C

Transaction ID : EXPB175

Amount of Each Disbursement this Period

24.51

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address 14 Arrow Street

City
CambridgeState
MAZip Code
02138Purpose of Disbursement
Merchant Fees

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	1			2	0	1	8		

FEC Identification Number

C

Transaction ID : EXPB182

Amount of Each Disbursement this Period

305.31

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address 14 Arrow Street

City
CambridgeState
MAZip Code
02138Purpose of Disbursement
Merchant Fees

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	8			2	0	1	8		

FEC Identification Number

C

Transaction ID : EXPB184

Amount of Each Disbursement this Period

44.51

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

374.33

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

PAGE 30 OF 36

<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)

Fight Back California

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address 14 Arrow Street

City
CambridgeState
MAZip Code
02138Purpose of Disbursement
Merchant Fees

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				2	5				2	0	1	8

FEC Identification Number

C

Transaction ID : EXPB210

Amount of Each Disbursement this Period

33.89

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address 14 Arrow Street

City
CambridgeState
MAZip Code
02138Purpose of Disbursement
Merchant Fees

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				2	8				2	0	1	8

FEC Identification Number

C

Transaction ID : EXPB196

Amount of Each Disbursement this Period

1.35

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. BaughmanMerrill

Mailing Address 1592 Union Street, Suite 401

City
San FranciscoState
CAZip Code
94123Purpose of Disbursement
Fundraising-Consulting

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				2	0				2	0	1	8

FEC Identification Number

C

Transaction ID : EXPB177

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2	5	3	5	.	2	4
---	---	---	---	---	---	---

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

PAGE 31 OF 36

<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)

Fight Back California

Full Name (Last, First, Middle Initial)

A. BaughmanMerrill

Mailing Address 1592 Union Street, Suite 401

City
San FranciscoState
CAZip Code
94123Purpose of Disbursement
Fundraising-Consulting

003

Category/
Type

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		20		2018

FEC Identification Number

C

Transaction ID : EXPB179

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BaughmanMerrill

Mailing Address 1592 Union Street, Suite 401

City
San FranciscoState
CAZip Code
94123Purpose of Disbursement
Web Consulting

001

Category/
Type

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		20		2018

FEC Identification Number

C

Transaction ID : EXPB180

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. BaughmanMerrill

Mailing Address 1592 Union Street, Suite 401

City
San FranciscoState
CAZip Code
94123Purpose of Disbursement
Fundraising Meeting

003

Category/
Type

Candidate Name

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

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		27		2018

FEC Identification Number

C

Transaction ID : EXPB191

Amount of Each Disbursement this Period

33.28

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

7533.28

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

PAGE 32 OF 36

<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)

Fight Back California

Full Name (Last, First, Middle Initial)

A. BaughmanMerrill

Mailing Address 1592 Union Street, Suite 401

City
San FranciscoState
CAZip Code
94123Purpose of Disbursement
Postage

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				2	7					2	0	1

FEC Identification Number

C

Transaction ID : EXPB189

Amount of Each Disbursement this Period

110.99

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BaughmanMerrill

Mailing Address 1592 Union Street, Suite 401

City
San FranciscoState
CAZip Code
94123Purpose of Disbursement
Online Ads

004

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				2	7					2	0	1

FEC Identification Number

C

Transaction ID : EXPB187

Amount of Each Disbursement this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. BaughmanMerrill

Mailing Address 1592 Union Street, Suite 401

City
San FranciscoState
CAZip Code
94123Purpose of Disbursement
Travel Expenses

002

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				2	7					2	0	1

FEC Identification Number

C

Transaction ID : EXPB185

Amount of Each Disbursement this Period

150.38

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

461.37

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

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

PAGE 33 OF 36

<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)

Fight Back California

Full Name (Last, First, Middle Initial)

A. BaughmanMerrill

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2018

Mailing Address 1592 Union Street, Suite 401

City
San FranciscoState
CAZip Code
94123Purpose of Disbursement
Online Ads

004

Category/
Type

Candidate Name

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

State: District:

FEC Identification Number

C

Transaction ID : EXPB193

Amount of Each Disbursement this Period

201.41

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Deane & Company

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2018

Mailing Address 1787 Tribute Road, Suite K

City
SacramentoState
CAZip Code
95815Purpose of Disbursement
Reporting Services

001

Category/
Type

Candidate Name

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

State: District:

FEC Identification Number

C

Transaction ID : EXPB173

Amount of Each Disbursement this Period

2177.75

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

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

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

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

State: District:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2379.16

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

13283.38

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 34 OF 36

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Fight Back California

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

BaughmanMerrillNature of Debt (Purpose):
Online Ads

Mailing Address 1592 Union Street, Suite 401

City

San Francisco

State

CA

Zip Code

94123

Outstanding Balance Beginning This Period

201.41

Transaction ID : PAYD164

Amount Incurred This Period

0.00

Payment This Period

201.41

Outstanding Balance at Close of This Period

0.00

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

BaughmanMerrillNature of Debt (Purpose):
Travel Expenses

Mailing Address 1592 Union Street, Suite 401

City

San Francisco

State

CA

Zip Code

94123

Outstanding Balance Beginning This Period

150.38

Transaction ID : PAYD165

Amount Incurred This Period

0.00

Payment This Period

150.38

Outstanding Balance at Close of This Period

0.00

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

BaughmanMerrillNature of Debt (Purpose):
Online Ads

Mailing Address 1592 Union Street, Suite 401

City

San Francisco

State

CA

Zip Code

94123

Outstanding Balance Beginning This Period

200.00

Transaction ID : PAYD166

Amount Incurred This Period

0.00

Payment This Period

200.00

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

0.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 35 OF 36

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Fight Back California

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

BaughmanMerrillNature of Debt (Purpose):
Postage

Mailing Address 1592 Union Street, Suite 401

City

San Francisco

State

CA

Zip Code

94123

Outstanding Balance Beginning This Period

110.99

Transaction ID : PAYD167

Amount Incurred This Period

0.00

Payment This Period

110.99

Outstanding Balance at Close of This Period

0.00

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

BaughmanMerrillNature of Debt (Purpose):
Fundraising Meeting

Mailing Address 1592 Union Street, Suite 401

City

San Francisco

State

CA

Zip Code

94123

Outstanding Balance Beginning This Period

33.28

Transaction ID : PAYD168

Amount Incurred This Period

0.00

Payment This Period

33.28

Outstanding Balance at Close of This Period

0.00

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

BaughmanMerrillNature of Debt (Purpose):
Fundraising-Consulting

Mailing Address 1592 Union Street, Suite 401

City

San Francisco

State

CA

Zip Code

94123

Outstanding Balance Beginning This Period

2500.00

Transaction ID : PAYD176

Amount Incurred This Period

0.00

Payment This Period

2500.00

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

0.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 36 OF 36

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Fight Back California

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

BaughmanMerrillNature of Debt (Purpose):
Web Consulting

Mailing Address 1592 Union Street, Suite 401

City

San Francisco

State

CA

Zip Code

94123

Outstanding Balance Beginning This Period

5000.00

Transaction ID : PAYD213

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5000.00

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)..... ►

5000.00

2) **TOTALS** This Period (last page this line number only)..... ►

5000.00

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) ►

5000.00