

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

ColorOfChange PAC

ADDRESS (number and street)

1714 Franklin St.

#100-136

☐ Check if different than previously reported. (ACC)

Oakland

CA

94612

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C

C00428557

3. IS THIS 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

☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

PRE-Election

☐

Convention (12C)

☐

Special (12S)

Report for the:

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

POST-Election

Report for the:

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

06

D D D /

01

Y Y Y Y Y Y Y Y

2026

through

M M M /

06

D D D /

30

Y Y Y Y Y Y Y Y

2026

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

Type or Print Name of Treasurer

Palmer, Kishshana, , ,

Signature of Treasurer

Palmer, Kishshana, , ,

Date

M M M /

07

D D D /

16

Y Y Y Y Y Y Y Y

2026

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

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

ColorOfChange PACReport Covering the Period: From:

M	M
06	

 /

D	D
01	

 /

Y	Y	Y	Y	Y
2	0	2	6	

 To:

M	M
06	

 /

D	D
30	

 /

Y	Y	Y	Y	Y
2	0	2	6	

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y 2026		2573140.52
(b) Cash on Hand at Beginning of Reporting Period.....	2583718.46	
(c) Total Receipts (from Line 19)	5686.67	36754.52
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	2589405.13	2609895.04
7. Total Disbursements (from Line 31).....	2205.53	22695.44
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	2587199.60	2587199.60
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)	121002.70	



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

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

ColorOfChange PAC

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y
06 01 2026

To:

M M / D D / Y Y Y Y Y
06 30 2026**I. Receipts****COLUMN A**
Total This Period**COLUMN B**
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

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

0.00

0.00

(ii) Unitemized

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

0.00

0.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

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

Totals to Line 33, page 5)

0.00

0.00

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

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

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

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

5686.67

36754.52

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))

5686.67

36754.52

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

5686.67

36754.52

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	14.00	84.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	14.00	84.00
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).....	2191.53	22611.44
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)) ..	2205.53	22695.44
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2205.53	22695.44

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)	0.00	0.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	14.00	84.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	14.00	84.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 6 OF 16
(check only one)

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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Afonso, Jose, , ,

Mailing Address PO Box 3535

City
ManchesterState
NHZip Code
03105-3535FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
SABISOccupation (for Individual)
Management

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 / 27 / 2026

Transaction ID : 6370392

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

B. Cutshall, Virginia, , ,Mailing Address 2068 N Humboldt Blvd
Apt 2City
ChicagoState
ILZip Code
60647-6208FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Fresh Cut Furniture LLCOccupation (for Individual)
Small Business Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 18 / 2026

Transaction ID : 6370183

Amount of Each Receipt this Period

60.00

☐ Memo Item

Non-Contribution Account

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

C. Drisdell, Walter, , ,

Mailing Address 2357 A Woolsey St

City
BerkeleyState
CAZip Code
94705-1940FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Lawrence Berkeley National LaboratoryOccupation (for Individual)
Scientist

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 / 03 / 2026

Transaction ID : 6369974

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

260.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 7 OF 16
(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Guthman, Julie, , ,

Mailing Address 2515 Derby St

City
BerkeleyState
CAZip Code
94705-1203FEC ID number of contributing
federal political committee.Name of Employer (for Individual)
University Of CaliforniaOccupation (for Individual)
Professor

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
06		20		2026

Transaction ID : 6370212

Amount of Each Receipt this Period

☐ Memo Item

Non-Contribution Account

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

B. Harford, Jonathan, , ,

Mailing Address 155 Staples Ave

City

San Francisco

State

CA

Zip Code

94112-1834

FEC ID number of contributing
federal political committee.Name of Employer (for Individual)
LiveAuctioneersOccupation (for Individual)
Programmer Computer

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
06		15		2026

Transaction ID : 6370150

Amount of Each Receipt this Period

☐ Memo Item

Non-Contribution Account

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

C. Holman, Christy, , ,

Mailing Address 28 Cherry Hills Farm Dr

City

Englewood

State

CO

Zip Code

80113-7165

FEC ID number of contributing
federal political committee.Name of Employer (for Individual)
Not EmployedOccupation (for Individual)
Not Employed

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
06		18		2026

Transaction ID : 6370182

Amount of Each Receipt this Period

☐ Memo Item

Non-Contribution Account

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 8 OF 16
(check only one)

☐ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☒ 17
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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Jenab, Michelle, , ,

Mailing Address 7286 3/4 Fountain Ave

City
West HollywoodState
CAZip Code
90046-5722FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Pro UnlimitedOccupation (for Individual)
Lawyer

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 / 28 / 2026**Transaction ID : 6370398**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

B. Kuhn, Melora, , ,

Mailing Address 300 Main St

City
GermantownState
NYZip Code
12526-5333FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Self EmployedOccupation (for Individual)
Artist

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 / 04 / 2026**Transaction ID : 6370006**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

C. Kuhn, Melora, , ,

Mailing Address 300 Main St

City
GermantownState
NYZip Code
12526-5333FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Self EmployedOccupation (for Individual)
Artist

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 / 23 / 2026**Transaction ID : 6370297**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

85.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 9 OF 16
(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. McFeeley, Sandra, , ,

Mailing Address 390 Tuskarora Trl

City
MooresvilleState
NCZip Code
28117-7319FEC ID number of contributing
federal political committee.Name of Employer (for Individual)
Not EmployedOccupation (for Individual)
Not Employed

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
06		17		2026

Transaction ID : 6370172

Amount of Each Receipt this Period

☐ Memo Item

Non-Contribution Account

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

B. Rahtz, Stewart, , ,

Mailing Address 251 W 30Th St

City
New YorkState
NYZip Code
10001-2810FEC ID number of contributing
federal political committee.Name of Employer (for Individual)
NoneOccupation (for Individual)
Retired

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
06		23		2026

Transaction ID : 6370317

Amount of Each Receipt this Period

☐ Memo Item

Non-Contribution Account

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

C. Shugoll, Arielle, , ,

Mailing Address 2212 Hermitage Ave

City
Silver SpringState
MDZip Code
20902-2870FEC ID number of contributing
federal political committee.Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
Psychologist

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
06		20		2026

Transaction ID : 6370214

Amount of Each Receipt this Period

☐ Memo Item

Non-Contribution Account

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 10 OF 16
(check only one)

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

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. St. Onge, Betsey, , ,

Mailing Address 182 Lake View Ave

City
CambridgeState
MAZip Code
02138-2132FEC ID number of contributing
federal political committee.

C

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

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 / 12 / 2026

Transaction ID : 6370127

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

B. Stockwell, Will, , ,

Mailing Address 135 Yukon St

City

San Francisco

State
CAZip Code
94114-2306FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Humble Audio LLCOccupation (for Individual)
Founder

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 / 04 / 2026

Transaction ID : 6369998

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

C. Thomas, Robert, , ,

Mailing Address 230 Lynx Ct

City

Fremont

State
CAZip Code
94539-6051FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not EmployedOccupation (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
06 / 04 / 2026

Transaction ID : 6369989

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

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

200.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 11 OF 16
(check only one)

☐ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☒ 17
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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Thompson, Mark, , ,

Mailing Address 22006 E Lost Lake Rd

City
SnohomishState
WAZip Code
98296-3929FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 15 / 2026

Transaction ID : 6370152

Amount of Each Receipt this Period

200.00

☐ Memo Item

Non-Contribution Account

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

B. Thompson, Megan, , ,Mailing Address 727 N Capitol Ave
Apt 306City
LansingState
MIZip Code
48906-5148FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Michigan State UniversityOccupation (for Individual)
Data Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 28 / 2026

Transaction ID : 6370405

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

C.

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)..... ►

250.00

1035.00

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

PAGE 12 OF 16

☐ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address PO Box 382110

City
CambridgeState
MAZip Code
02238-2110

Purpose of Disbursement

Credit Card Processing Fees

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	7			2	0	2	6	

FEC Identification Number

C

Transaction ID : 500756882

Amount of Each Disbursement this Period

55.25

☐ Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address PO Box 382110

City
CambridgeState
MAZip Code
02238-2110

Purpose of Disbursement

Credit Card Processing Fees

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify)		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	4			2	0	2	6	

FEC Identification Number

C

Transaction ID : 500756883

Amount of Each Disbursement this Period

28.34

☐ Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address PO Box 382110

City
CambridgeState
MAZip Code
02238-2110

Purpose of Disbursement

Credit Card Processing Fees

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : 500756884

Amount of Each Disbursement this Period

57.16

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

140.75

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

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☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address PO Box 382110

City
CambridgeState
MAZip Code
02238-2110

Purpose of Disbursement

Credit Card Processing Fees

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	8			2	0	2	6	

FEC Identification Number

C

Transaction ID : 500756885

Amount of Each Disbursement this Period

69.76

☐ Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address PO Box 382110

City
CambridgeState
MAZip Code
02238-2110

Purpose of Disbursement

Credit Card Processing Fees

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify)		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : 500756886

Amount of Each Disbursement this Period

15.86

☐ Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

C. Amalgamated BankMailing Address 275 7Th Ave
FI 8City
New YorkState
NYZip Code
10001-6995

Purpose of Disbursement

Bank Fees

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	9			2	0	2	6	

FEC Identification Number

C

Transaction ID : 500756890

Amount of Each Disbursement this Period

268.00

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

353.62

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

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☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Bill.Com

Mailing Address 1810 Embarcadero Rd

City
Palo AltoState
CAZip Code
94303-3308

Purpose of Disbursement

Accounting Software

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	7			2	0	2	6	

FEC Identification Number

C

Transaction ID : 500756982

Amount of Each Disbursement this Period

831.59

☐ Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

B. First Bank

Mailing Address 11901 Olive Blvd

City
Saint LouisState
MOZip Code
63141-6736

Purpose of Disbursement

Bank Fees

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify)		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : 500756887

Amount of Each Disbursement this Period

53.12

☐ Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

C. Lebin Yates Consulting, LLC

Mailing Address PO Box 41112

City
AustinState
TXZip Code
78704-0019

Purpose of Disbursement

Compliance Services

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	4			2	0	2	6	

FEC Identification Number

C

Transaction ID : 500756981

Amount of Each Disbursement this Period

199.95

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

1084.66

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

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☐ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Lebin Yates Consulting, LLC

Mailing Address PO Box 41112

City
AustinState
TXZip Code
78704-0019

Purpose of Disbursement

Compliance Services

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	6			2	9			2	0	2	6		

FEC Identification Number

C

Transaction ID : 500757034

Amount of Each Disbursement this Period

300.00

☐ Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

B. Sandler, Reiff, Young & Lamb, P.C.Mailing Address 1090 Vermont Ave NW
Ste 750City
WashingtonState
DCZip Code
20005-4970

Purpose of Disbursement

Legal Services

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	6			3	0			2	0	2	6		

FEC Identification Number

C

Transaction ID : 500757035

Amount of Each Disbursement this Period

312.50

☐ Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

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

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

612.50

2191.53

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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

Toskr Inc

Nature of Debt (Purpose):

Auto-Dialer

Mailing Address 1330 Broadway
FI 3City
OaklandState
CAZip Code
94612-2503

Outstanding Balance Beginning This Period

604.27

Transaction ID : 1250010872

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

604.27

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

Toskr Inc

Nature of Debt (Purpose):

Digital Communications

Mailing Address 1330 Broadway
FI 3City
OaklandState
CAZip Code
94612-2503

Outstanding Balance Beginning This Period

108037.58

Transaction ID : 1250013683

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

108037.58

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

Upland Software Inc

Nature of Debt (Purpose):

Digital Communications

Mailing Address 401 Congress Ave
Ste 1850City
AustinState
TXZip Code
78701-3788

Outstanding Balance Beginning This Period

12360.85

Transaction ID : 1250010866

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

12360.85

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

121002.70

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

121002.70

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) ►

121002.70