

**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

Working Families Party PAC

ADDRESS (number and street)

77 Sands Street

Check if different
than previously
reported. (ACC)

Brooklyn

NY

11201

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C

C00606962

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 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 Y

in the
State of

5. Covering Period

M M M /

05

D D D /

01

Y Y Y Y Y Y Y

2026

through

M M M /

05

D D D /

31

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

Boland, Mike, , ,

Signature of Treasurer

Boland, Mike, , ,

Date

M M M /

06

D D D /

20

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

Working Families Party PACReport Covering the Period: From:

M M	/	D D	/	Y Y Y Y Y
05		01		2026

 To:

M M	/	D D	/	Y Y Y Y Y
05		31		2026

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y 2026		4985394.14
(b) Cash on Hand at Beginning of Reporting Period.....	5915917.76	
(c) Total Receipts (from Line 19)	4045145.69	8653147.23
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	9961063.45	13638541.37
7. Total Disbursements (from Line 31).....	2057297.18	5734775.10
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	7903766.27	7903766.27
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	9966.50	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	1932472.32	



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

Working Families Party PAC

Report Covering the Period:

From:

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

To:

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

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).....	21150.00	97630.18
(ii) Unitemized	67529.05	367599.04
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	88679.05	465229.22
(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)	88679.05	465229.22
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	8096.48
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	3956466.64	8179821.53
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))	4045145.69	8653147.23
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	4045145.69	8653147.23

DETAILED SUMMARY PAGE of Disbursements

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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	15118.87	2283520.85
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	15118.87	2283520.85
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	30000.00
24. Independent Expenditures (use Schedule E)	1137217.97	1812232.12
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).....	904960.34	1609022.13
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)) ..	2057297.18	5734775.10
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2057297.18	5734775.10

DETAILED SUMMARY PAGE
of Disbursements

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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)	88679.05	465229.22
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	88679.05	465229.22
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	15118.87	2283520.85
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	8096.48
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	15118.87	2275424.37

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

FOR LINE NUMBER: PAGE 6 OF 212

(check only one)

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

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

NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Adam, Reed, , ,Mailing Address 800 NE 67th St
Apt 216City
SeattleState
WAZip Code
98115-5757FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Seattle City LightOccupation (for Individual)
Auditor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 02 / 2026**Transaction ID : 2743004**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Adams, Yvonne, , ,

Mailing Address 25 Marion Rd

City
WatertownState
MAZip Code
02472-4732FEC 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 ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 18 / 2026**Transaction ID : 2744344**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. Adkins, Mckenzie, , ,Mailing Address 607 22nd Ave
Apt 1City
SeattleState
WAZip Code
98122-6088FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Botanical DesignsOccupation (for Individual)
Landscape designer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 2745724**

Amount of Each Receipt this Period

50.00

☐ Memo Item**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 7 OF 212
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Altman, Danny, , ,

Mailing Address 16 Salt Lndg

City
TiburonState
CAZip Code
94920-2247FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
A Hundred Monkeys IncOccupation (for Individual)
Founder

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 2743331

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. Alvarez, Jose, , ,

Mailing Address 83 Iroquois Rd

City
YonkersState
NYZip Code
10710-5031FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Imagine Us, LLCOccupation (for Individual)
OD consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 23 / 2026

Transaction ID : 2745176

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. Avakian, Arlene, , ,

Mailing Address 33 Olander Dr

City
NorthamptonState
MAZip Code
01060-3631FEC 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 ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 28 / 2026

Transaction ID : 2743062

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

250.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 8 OF 212
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Avery, Todd, , ,

Mailing Address 232 S Ann Arbor St

City
SalineState
MIZip Code
48176-1304FEC 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 ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 18 / 2026

Transaction ID : 2742256

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. Baldwin, Jessica, , ,

Mailing Address 3210 United Dr

City

Cameron Park

State
CAZip Code
95682-9277FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
el dorado county office of educationOccupation (for Individual)
substitute teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2026

Transaction ID : 2745386

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Bingham, Robert, , ,

Mailing Address 28 E Roumfort Rd

City

Philadelphia

State
PAZip Code
19119-1618FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MCC family servicesOccupation (for Individual)
therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

675.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 14 / 2026

Transaction ID : 2744849

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

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

165.00

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

FOR LINE NUMBER: PAGE 9 OF 212

(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Bingham, Robert, , ,

Mailing Address 28 E Roumfort Rd

City
PhiladelphiaState
PAZip Code
19119-1618FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MCC family servicesOccupation (for Individual)
therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 14 / 2026

Transaction ID : 2744850

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

B. Bingham, Robert, , ,

Mailing Address 28 E Roumfort Rd

City
PhiladelphiaState
PAZip Code
19119-1618FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MCC family servicesOccupation (for Individual)
therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 27 / 2026

Transaction ID : 2744851

Amount of Each Receipt this Period

150.00

☐ Memo Item

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

C. Birecki, Helena, , ,

Mailing Address 117 NW Trinity Pl

City
PortlandState
ORZip Code
97209-1968FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Helena Birecki (self-employed)Occupation (for Individual)
Pilates teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 02 / 2026

Transaction ID : 2742382

Amount of Each Receipt this Period

3800.00

☐ Memo Item

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

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

3970.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 10 OF 212
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Birecki, Helena, , ,

Mailing Address 117 NW Trinity Pl

City
PortlandState
ORZip Code
97209-1968FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Helena Birecki (self-employed)Occupation (for Individual)
Pilates teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 05 / 2026**Transaction ID : 2742381**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. Bloem, Marie, , ,

Mailing Address 1380 Clinton St

City
AuroraState
COZip Code
80010-3115FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Square Peg TherapiesOccupation (for Individual)
Speech Pathologist

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
05 / 15 / 2026**Transaction ID : 2741982**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. Bloem, Marie, , ,

Mailing Address 1380 Clinton St

City
AuroraState
COZip Code
80010-3115FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Square Peg TherapiesOccupation (for Individual)
Speech Pathologist

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
05 / 15 / 2026**Transaction ID : 2741983**

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)..... ►

360.00

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

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

FOR LINE NUMBER: PAGE 11 OF 212

(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Bloem, Marie, , ,

Mailing Address 1380 Clinton St

City
Aurora

State
CO

Zip Code
80010-3115

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Square Peg Therapies

Occupation (for Individual)
Speech Pathologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

05 / 18 / 2026

Transaction ID : 2741984

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

B. Bohannon, Adam, , ,

Mailing Address 3612 Spa St

City
San Diego

State
CA

Zip Code
92105-3851

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Housecall Pro

Occupation (for Individual)
Software Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 01 / 2026

Transaction ID : 2743030

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. Bowling, Jacob, , ,

Mailing Address 1210 S 3rd St

City
Philadelphia

State
PA

Zip Code
19147-5304

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Bowling Business Strategies

Occupation (for Individual)
Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2026

Transaction ID : 2742921

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

240.00

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

FOR LINE NUMBER: PAGE 12 OF 212

(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Brady, Beth, , ,

Mailing Address 1320 Seward St

City
EvanstonState
ILZip Code
60202-2129FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Evanston Skokie Dist. 65Occupation (for Individual)
Teacher

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
05 / 02 / 2026**Transaction ID : 2743553**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. Brandt, Craig, , ,

Mailing Address 1307 Canterbury St

City
AustinState
TXZip Code
78702-5320FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EBSCO Information ServicesOccupation (for Individual)
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
05 / 27 / 2026**Transaction ID : 2745448**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Bronfman, Dana, , ,

Mailing Address 63 Downing St

City
New YorkState
NYZip Code
10014-4331FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SelfOccupation (for Individual)
Designer, Business Owner

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
05 / 08 / 2026**Transaction ID : 2743791**

Amount of Each Receipt this Period

100.00

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

250.00

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

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

FOR LINE NUMBER: PAGE 13 OF 212

(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Brooks, Joan M, , ,

Mailing Address 639 E End Ave

City
Pittsburgh

State
PA

Zip Code
15221-3423

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self

Occupation (for Individual)
Holistic Healer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

05 / 13 / 2026

Transaction ID : 2743546

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Brooks, Joan M, , ,

Mailing Address 639 E End Ave

City
Pittsburgh

State
PA

Zip Code
15221-3423

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self

Occupation (for Individual)
Holistic Healer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

05 / 17 / 2026

Transaction ID : 2743545

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

C. Brotsky, Louise, , ,

Mailing Address 1713 Sanchez St

City
San Francisco

State
CA

Zip Code
94131-2740

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

05 / 23 / 2026

Transaction ID : 2742975

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

140.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 14 OF 212
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Brown, Adrienne Maree, , ,

Mailing Address 3745 2nd Ave

City
DetroitState
MIZip Code
48201-1755FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allied Media ProjectsOccupation (for Individual)
writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 27 / 2026

Transaction ID : 2746067

Amount of Each Receipt this Period

27.00

☐ Memo Item

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

B. Brownell, Ian, , ,

Mailing Address 15 Grove St

City
MedfordState
MAZip Code
02155-1402FEC 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 ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 17 / 2026

Transaction ID : 2744356

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. Brunner, Joseph, , ,

Mailing Address 1316 Arnold Ave NE

City
AtlantaState
GAZip Code
30324-4620FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SquareOccupation (for Individual)
Software Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 26 / 2026

Transaction ID : 2745041

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

177.00

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

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

FOR LINE NUMBER: PAGE 15 OF 212

(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. burris, james, , ,

Mailing Address 1807 Claiborne St

City
Richmond

State
VA

Zip Code
23220-6306

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 02 / 2026

Transaction ID : 2742982

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. burris, james, , ,

Mailing Address 1807 Claiborne St

City
Richmond

State
VA

Zip Code
23220-6306

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

05 / 19 / 2026

Transaction ID : 2742983

Amount of Each Receipt this Period

150.00

☐ Memo Item

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

C. burris, james, , ,

Mailing Address 1807 Claiborne St

City
Richmond

State
VA

Zip Code
23220-6306

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

05 / 27 / 2026

Transaction ID : 2742984

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

350.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 16 OF 212
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Carter, Kimberley, , ,

Mailing Address 5253 Verdura Ave

City
LakewoodState
CAZip Code
90712-2227FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SelfOccupation (for Individual)
Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2026

Transaction ID : 2744816

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. Carter, Kimberley, , ,

Mailing Address 5253 Verdura Ave

City
LakewoodState
CAZip Code
90712-2227FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SelfOccupation (for Individual)
Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 20 / 2026

Transaction ID : 2744817

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. Chandler, Marguerite, , ,

Mailing Address 1382 Newtown Langhorne Rd

City
NewtownState
PAZip Code
18940-2418FEC 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 ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 14 / 2026

Transaction ID : 2745796

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

100.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 17 OF 212
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Chisholm, Mitchell, , ,

Mailing Address 4732 Osage Ave

City
PhiladelphiaState
PAZip Code
19143-1815FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SelfOccupation (for Individual)
Architecture

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 18 / 2026

Transaction ID : 2744557

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. Cohen, Naomi, , ,

Mailing Address PO Box 39

City
Gap MillsState
WVZip Code
24941-0039FEC 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 ▼

235.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 11 / 2026

Transaction ID : 2745418

Amount of Each Receipt this Period

22.00

☐ Memo Item

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

C. Conle, Fritz, , ,

Mailing Address 162 Spumonte Ct

City
Los BanosState
CAZip Code
93635-6323FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Mallison & MartinezOccupation (for Individual)
Investigator

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 18 / 2026

Transaction ID : 2744380

Amount of Each Receipt this Period

27.00

☐ Memo Item

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

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

149.00

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

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

FOR LINE NUMBER: PAGE 18 OF 212

(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Conle, Fritz, , ,

Mailing Address 162 Spumonte Ct

City
Los Banos

State
CA

Zip Code
93635-6323

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Mallison & Martinez

Occupation (for Individual)
Investigator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

05 / 18 / 2026

Transaction ID : 2744381

Amount of Each Receipt this Period

27.00

☐ Memo Item

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

B. Cortes, Elise, , ,

Mailing Address 537 E Van Bibber Ave

City
Orange

State
CA

Zip Code
92866-2027

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vincor Construction Inc

Occupation (for Individual)
Construction Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 17 / 2026

Transaction ID : 2746247

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. Cowan, Michael, , ,

Mailing Address 3625 Hughes Ave

City
Los Angeles

State
CA

Zip Code
90034-3910

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not employed

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

05 / 14 / 2026

Transaction ID : 2745556

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

302.00

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

FOR LINE NUMBER: PAGE 19 OF 212

(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Cowan, Michael, , ,

Mailing Address 3625 Hughes Ave

City
Los AngelesState
CAZip Code
90034-3910FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not employedOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 28 / 2026

Transaction ID : 2745557

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. Daniel, Vanessa, , ,

Mailing Address 3516 N Ferdinand St

City
TacomaState
WAZip Code
98407-4112FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SelfOccupation (for Individual)
Writer & consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 25 / 2026

Transaction ID : 2744227

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Davalos, Jose, , ,

Mailing Address 7831 Austin Ave

City
BurbankState
ILZip Code
60459-1213FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
YesOccupation (for Individual)
None

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2026

Transaction ID : 2742179

Amount of Each Receipt this Period

45.00

☐ Memo Item

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

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

120.00

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

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

FOR LINE NUMBER: PAGE 20 OF 212

(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Davis, Louise, , ,

Mailing Address 9443 Cottonwood Rd

City
Bozeman

State
MT

Zip Code
59718-8966

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

05 / 16 / 2026

Transaction ID : 2745610

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

B. Davis, Louise, , ,

Mailing Address 9443 Cottonwood Rd

City
Bozeman

State
MT

Zip Code
59718-8966

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

05 / 21 / 2026

Transaction ID : 2745609

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

C. Davis, Louise, , ,

Mailing Address 9443 Cottonwood Rd

City
Bozeman

State
MT

Zip Code
59718-8966

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

05 / 28 / 2026

Transaction ID : 2745611

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

90.00

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

FOR LINE NUMBER: PAGE 21 OF 212

(check only one)

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

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

NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. De Dona, Joseph, , ,Mailing Address 2 Bay Club Dr
Apt 12WCity
BaysideState
NYZip Code
11360-2928FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Solum LLCOccupation (for Individual)
Property Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 2742960

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. Delong, Margaret Macy, , ,

Mailing Address 54 Fisher Rd

City
ArlingtonState
MAZip Code
02476-7644FEC 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 ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 05 / 2026

Transaction ID : 2744605

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. Dew, Catherine, , ,

Mailing Address 563 Martin St

City
OaklandState
CAZip Code
94609-1568FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
2Plus2 PartnersOccupation (for Individual)
Information Architect

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

185.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 02 / 2026

Transaction ID : 2744570

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

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

205.00

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

FOR LINE NUMBER: PAGE 22 OF 212

(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Dew, Catherine, , ,

Mailing Address 563 Martin St

City
OaklandState
CAZip Code
94609-1568FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
2Plus2 PartnersOccupation (for Individual)
Information Architect

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 18 / 2026

Transaction ID : 2744571

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

B. Diffenderfer, Emily, , ,

Mailing Address 3875 Midvale Rd

City
TuckerState
GAZip Code
30084-3317FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SalesforceOccupation (for Individual)
Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 17 / 2026

Transaction ID : 2743707

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Dileo, Alex, , ,

Mailing Address 906 Oakland Dr SW

City
AtlantaState
GAZip Code
30310-3328FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Atlanta Botanical GardenOccupation (for Individual)
Fundraiser

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 14 / 2026

Transaction ID : 2744003

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

140.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 23 OF 212
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Dodd, Anne, , ,

Mailing Address 1151 N Quivey Hill Ln

City
WhitehallState
NYZip Code
12887-3217FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 09 / 2026

Transaction ID : 2745909

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Dooley, Katherine, , ,

Mailing Address 2116 Sleepy Hollow Rd

City
EscondidoState
CAZip Code
92026-1121FEC 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 ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 14 / 2026

Transaction ID : 2741661

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

C. Dooley-Sammuli, Margaret, , ,

Mailing Address 7965 Glenda Way

City
San DiegoState
CAZip Code
92126-2224FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
A New Way of Life Reentry ProjectOccupation (for Individual)
Chief Strategist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 30 / 2026

Transaction ID : 2743462

Amount of Each Receipt this Period

100.00

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

350.00

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

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

FOR LINE NUMBER: PAGE 24 OF 212

(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Dougherty, Kevin, , ,

Mailing Address 405 Grant Ave

City
Highland Park

State
NJ

Zip Code
08904-2705

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

190.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 06 / 2026

Transaction ID : 2746069

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. Dougherty, Kevin, , ,

Mailing Address 405 Grant Ave

City
Highland Park

State
NJ

Zip Code
08904-2705

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 26 / 2026

Transaction ID : 2746070

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. Dougherty, Kevin, , ,

Mailing Address 405 Grant Ave

City
Highland Park

State
NJ

Zip Code
08904-2705

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 27 / 2026

Transaction ID : 2746068

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

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

140.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 25 OF 212
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Elizabeth Graham, Lauren, , ,

Mailing Address 359 Inman St SW

City
AtlantaState
GAZip Code
30310-1212FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SquareOccupation (for Individual)
Software engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 27 / 2026

Transaction ID : 2746043

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. Epstein, Ellen, , ,

Mailing Address 15 Grove St

City
MedfordState
MAZip Code
02155-1402FEC 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 ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 13 / 2026

Transaction ID : 2743969

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. Ethridge, Matt, , ,

Mailing Address 1314 6th St

City
AnacortesState
WAZip Code
98221-1724FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
selfOccupation (for Individual)
farmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 01 / 2026

Transaction ID : 2743782

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

300.00

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

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

FOR LINE NUMBER: PAGE 26 OF 212

(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Farbman, Eileen, , ,

Mailing Address 27 W 72nd St

City
New York

State
NY

Zip Code
10023-3498

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2026

Transaction ID : 2744244

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Fasulo, Joanie, , ,

Mailing Address 608 N Cleveland St

City
Richmond

State
VA

Zip Code
23221-1625

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Nelson Mullins

Occupation (for Individual)
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

05 / 19 / 2026

Transaction ID : 2744920

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. Feigenbaum, Peter, , ,

Mailing Address 39 Wells Ave

City
Croton On Hudson

State
NY

Zip Code
10520-2530

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Fordham University

Occupation (for Individual)
Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

205.00

Date of Receipt

05 / 10 / 2026

Transaction ID : 2743640

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

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

165.00

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

FOR LINE NUMBER: PAGE 27 OF 212

(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Feigenbaum, Peter, , ,

Mailing Address 39 Wells Ave

City

Croton On Hudson

State

NY

Zip Code

10520-2530

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Fordham University

Occupation (for Individual)

Administrator

Receipt For:

☐
☐

Primary

☐ General

Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 17 / 2026

Transaction ID : 2743639

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

B. Fenner, Chad, , ,

Mailing Address 2120 Titan St

City

Philadelphia

State

PA

Zip Code

19146-4319

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Clean Harbors

Occupation (for Individual)

Pricing specialist

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
05 / 13 / 2026

Transaction ID : 2742236

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. Finnell, John, , ,

Mailing Address 1403 Fairwood Rd

City

Austin

State

TX

Zip Code

78722-1025

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

VHA

Occupation (for Individual)

Physician

Receipt For:

☐
☐

Primary

☐ General

Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 24 / 2026

Transaction ID : 2741730

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

140.00

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 Page

FOR LINE NUMBER: PAGE 28 OF 212

(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Frye, Laura, , ,Mailing Address 3731 73rd St
Apt 3KCity
Jackson HeightsState
NYZip Code
11372-6243FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GynuityOccupation (for Individual)
Researcher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 07 / 2026

Transaction ID : 2744637

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. Gardner, Kim, , ,

Mailing Address 1807 E 16th St

City
AustinState
TXZip Code
78702-1216FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MozillaOccupation (for Individual)
Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 07 / 2026

Transaction ID : 2743050

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Gilburg, Alan, , ,

Mailing Address 5 Gamelin St

City
HolyokeState
MAZip Code
01040-4072FEC 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 ▼

253.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 03 / 2026

Transaction ID : 2744919

Amount of Each Receipt this Period

27.00

☐ Memo Item

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

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

102.00

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

FOR LINE NUMBER: PAGE 29 OF 212

(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Gilburg, Alan, , ,

Mailing Address 5 Gamelin St

City
HolyokeState
MAZip Code
01040-4072FEC 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 ▼

280.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 18 / 2026

Transaction ID : 2744918

Amount of Each Receipt this Period

27.00

☐ Memo Item

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

B. Grant, Angela, , ,

Mailing Address 440 Meadow Bloom Ct

City
RosevilleState
CAZip Code
95747-5985FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Palomar Holdings, Inc.Occupation (for Individual)
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

321.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 05 / 2026

Transaction ID : 2744724

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Halyard, Tashira, , ,

Mailing Address 5300 Holmes Run Pkwy

City
AlexandriaState
VAZip Code
22304-2834FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Politics and FashionOccupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 14 / 2026

Transaction ID : 2744969

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

177.00

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

FOR LINE NUMBER: PAGE 30 OF 212

(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Heise, Rachel, , ,

Mailing Address 295 Johnston Ave

City
Jersey CityState
NJZip Code
07304-4305FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Weill Cornell MedicineOccupation (for Individual)
Biostatistician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 17 / 2026

Transaction ID : 2745149

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

B. Hermes, Molly, , ,

Mailing Address 2580 Tassajara Ave

City
El CerritoState
CAZip Code
94530-1564FEC 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 ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 09 / 2026

Transaction ID : 2742490

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Hess, Donald, , ,

Mailing Address PO Box 1852

City
GualalaState
CAZip Code
95445-1852FEC 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 ▼

125.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 26 / 2026

Transaction ID : 2743301

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

150.00

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

FOR LINE NUMBER: PAGE 31 OF 212

(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Hess, Donald, , ,

Mailing Address PO Box 1852

City
GualalaState
CAZip Code
95445-1852FEC 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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 28 / 2026

Transaction ID : 2743302

Amount of Each Receipt this Period

125.00

☐ Memo Item

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

B. Heth, Travis, , ,

Mailing Address 3116 E Ravenswood Dr

City
GilbertState
AZZip Code
85298-9033FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AASOccupation (for Individual)
BCBA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 23 / 2026

Transaction ID : 2745809

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. Hicks, Sharon, , ,

Mailing Address 276 Connecting Rd

City
PittsburghState
PAZip Code
15228-2136FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Open MindsOccupation (for Individual)
Health Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 28 / 2026

Transaction ID : 2742962

Amount of Each Receipt this Period

100.00

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

325.00

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

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

FOR LINE NUMBER: PAGE 32 OF 212

(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Hodes, Peter, , ,

Mailing Address 5969 W 74th St

City
Los Angeles

State
CA

Zip Code
90045-1601

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

05 / 02 / 2026

Transaction ID : 2745437

Amount of Each Receipt this Period

54.00

☐ Memo Item

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

B. Hodes, Peter, , ,

Mailing Address 5969 W 74th St

City
Los Angeles

State
CA

Zip Code
90045-1601

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

05 / 11 / 2026

Transaction ID : 2745436

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. Hoefer, Laurie, , ,

Mailing Address 715 Mcgilchrist St SE

City
Salem

State
OR

Zip Code
97302-3748

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NWJP

Occupation (for Individual)
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

100.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 2742145

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

164.00

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

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

FOR LINE NUMBER: PAGE 33 OF 212

(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Hoefer, Laurie, , ,

Mailing Address 715 Mcgilchrist St SE

City
Salem

State
OR

Zip Code
97302-3748

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NWJP

Occupation (for Individual)
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

05 / 15 / 2026

Transaction ID : 2742146

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. Howe, Mike, , ,

Mailing Address PSC 701 Box 1251

City
APO

State
AP

Zip Code
96555-0013

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Usace

Occupation (for Individual)
Project manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

05 / 13 / 2026

Transaction ID : 2743508

Amount of Each Receipt this Period

49.00

☐ Memo Item

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

C. Hunter, Sarah, , ,

Mailing Address 8102 Chester St

City
Takoma Park

State
MD

Zip Code
20912-7339

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Housing Justice Collective

Occupation (for Individual)
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 07 / 2026

Transaction ID : 2744639

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

349.00

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

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

FOR LINE NUMBER: PAGE 34 OF 212

(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Isman, Seth, , ,

Mailing Address 225 Middle St

City
Hadley

State
MA

Zip Code
01035-9717

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

05 / 15 / 2026

Transaction ID : 2744811

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. Isman, Seth, , ,

Mailing Address 225 Middle St

City
Hadley

State
MA

Zip Code
01035-9717

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

05 / 16 / 2026

Transaction ID : 2744813

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

C. Isman, Seth, , ,

Mailing Address 225 Middle St

City
Hadley

State
MA

Zip Code
01035-9717

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

235.00

Date of Receipt

05 / 27 / 2026

Transaction ID : 2744814

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

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

45.00

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

FOR LINE NUMBER: PAGE 35 OF 212

(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Isman, Seth, , ,

Mailing Address 225 Middle St

City
HadleyState
MAZip Code
01035-9717FEC 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 ▼

245.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 30 / 2026

Transaction ID : 2744812

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. Jackson, Karen, , ,

Mailing Address 302 Tuttle Rd

City
WoodburyState
CTZip Code
06798-3636FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SelfOccupation (for Individual)
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 17 / 2026

Transaction ID : 2744357

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. JF, Rachel, , ,

Mailing Address 5445 Marine Ave

City
LawndaleState
CAZip Code
90260-1102FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Esq. ApprenticeOccupation (for Individual)
Lawyer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 06 / 2026

Transaction ID : 2742366

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

210.00

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

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

FOR LINE NUMBER: PAGE 36 OF 212

(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. JF, Rachel, , ,

Mailing Address 5445 Marine Ave

City
Lawndale

State
CA

Zip Code
90260-1102

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Esq. Apprentice

Occupation (for Individual)

Lawyer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

05 / 12 / 2026

Transaction ID : 2742367

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. Johnson, Andrea, , ,

Mailing Address 1604 Trawler Ln

City
Annapolis

State
MD

Zip Code
21409-3718

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

05 / 17 / 2026

Transaction ID : 2744367

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Johnston, Alicia, , ,

Mailing Address 3526 N Halsted St
Apt 3

City
Chicago

State
IL

Zip Code
60657-2928

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

sprout social

Occupation (for Individual)

marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 09 / 2026

Transaction ID : 2742482

Amount of Each Receipt this Period

50.00

☐ Memo Item

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 37 OF 212
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Jones, Anne, , ,

Mailing Address 7416 Kedvale Ave

City
SkokieState
ILZip Code
60076-3802FEC 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 ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 02 / 2026**Transaction ID : 2744679**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

B. Jones, Bonnie, , ,

Mailing Address 311 Queen St

City
PhiladelphiaState
PAZip Code
19147-3220FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-employedOccupation (for Individual)
Foundation advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 11 / 2026**Transaction ID : 2743589**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. Joye, James, , ,

Mailing Address 1224 41st St

City
SacramentoState
CAZip Code
95819-3623FEC 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 ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 01 / 2026**Transaction ID : 2744772**

Amount of Each Receipt this Period

50.00

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

170.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 38 OF 212
(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Kaiserman, Brad, , ,

Mailing Address 6627 Willoughby Ave

City
Los AngelesState
CAZip Code
90038-2507FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
The Law Office of Brad K. KaisermanOccupation (for Individual)
Lawyer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2026

Transaction ID : 2743610

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. Kaplan-Nelson, Sierra, , ,

Mailing Address 25 Homestead St

City
San FranciscoState
CAZip Code
94114-3517FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Empower organizing projectOccupation (for Individual)
University Student

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 2745748

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

C. Kaplan-Nelson, Sierra, , ,

Mailing Address 25 Homestead St

City
San FranciscoState
CAZip Code
94114-3517FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Empower organizing projectOccupation (for Individual)
University Student

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 25 / 2026

Transaction ID : 2745747

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

190.00

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

FOR LINE NUMBER: PAGE 39 OF 212

(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. king, carrie, , ,

Mailing Address 5108 Thomas Ave S

City
MinneapolisState
MNZip Code
55410-2241FEC 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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 18 / 2026

Transaction ID : 2742971

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. Krumberger, Emily, , ,

Mailing Address 1936 Dupont Ave S

City
MinneapolisState
MNZip Code
55403-3035FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AMPERSOccupation (for Individual)
Producer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 07 / 2026

Transaction ID : 2744158

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

C. Krumberger, Emily, , ,

Mailing Address 1936 Dupont Ave S

City
MinneapolisState
MNZip Code
55403-3035FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AMPERSOccupation (for Individual)
Producer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 23 / 2026

Transaction ID : 2744157

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

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

180.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 40 OF 212
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Kumar, Rohit, , ,

Mailing Address 595 Athol Ave

City
OaklandState
CAZip Code
94606-1572FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WorkdayOccupation (for Individual)
Software Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 25 / 2026

Transaction ID : 2745031

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Lamberson, Danny, , ,

Mailing Address 465 Nutt Rd

City
PhoenixvilleState
PAZip Code
19460-3957FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Trackforce ValiantOccupation (for Individual)
Customer Success Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 17 / 2026

Transaction ID : 2741957

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Lass, Fred, , ,

Mailing Address 4010 Barner Ave

City
OaklandState
CAZip Code
94602-3415FEC 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 ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 27 / 2026

Transaction ID : 2746072

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

150.00

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

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

FOR LINE NUMBER: PAGE 41 OF 212

(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Layne III, Wendell, , ,

Mailing Address 2071 Hatteras Way NW

City
Atlanta

State
GA

Zip Code
30318-1085

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Fund II Foundation

Occupation (for Individual)

Dir. of Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

MM / DD / YYYY
05 / 01 / 2026

Transaction ID : 2742125

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

B. Layne III, Wendell, , ,

Mailing Address 2071 Hatteras Way NW

City
Atlanta

State
GA

Zip Code
30318-1085

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Fund II Foundation

Occupation (for Individual)

Dir. of Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY
05 / 23 / 2026

Transaction ID : 2742126

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

C. Lee, Teri, , ,

Mailing Address 4010 Barner Ave

City
Oakland

State
CA

Zip Code
94602-3415

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
05 / 27 / 2026

Transaction ID : 2746096

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

130.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 42 OF 212
(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Lerman, Julia, , ,Mailing Address 1519 Spruce St
Fl 2City
PhiladelphiaState
PAZip Code
19102-4577FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SelfOccupation (for Individual)
Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 05 / 2026**Transaction ID : 2744094**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Li, Kendra, , ,

Mailing Address 1515 Richmond Hwy

City
ArlingtonState
VAZip Code
22202-3314FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
US Air ForceOccupation (for Individual)
Military Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2026**Transaction ID : 2743772**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. Liu, Mini, , ,

Mailing Address 135 Eastern Pkwy

City
BrooklynState
NYZip Code
11238-6054FEC 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 ▼

750.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 2745866**

Amount of Each Receipt this Period

100.00

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

250.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 43 OF 212
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Livoti, Jessica, , ,

Mailing Address 1124 G St NE

City
WashingtonState
DCZip Code
20002-4416FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MaremotoOccupation (for Individual)
Executive Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 25 / 2026

Transaction ID : 2743351

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. Loelace, Simona, , ,

Mailing Address 6831 Dartmouth St

City
Forest HillsState
NYZip Code
11375-5046FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self EmployedOccupation (for Individual)
Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 10 / 2026

Transaction ID : 2742443

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Lord, Zakiya, , ,

Mailing Address 5717 4th St NW

City
WashingtonState
DCZip Code
20011-2128FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MvpOccupation (for Individual)
Donor advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 13 / 2026

Transaction ID : 2744376

Amount of Each Receipt this Period

47.00

☐ Memo Item

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

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

197.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 44 OF 212
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Lot, Kayleigh, , ,

Mailing Address 558 Tacoma Dr

City
ClarksvilleState
TNZip Code
37043-2123FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AccentureOccupation (for Individual)
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 10 / 2026

Transaction ID : 2742592

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. Lubeck, Susan, , ,

Mailing Address 14 Alida Ct

City
OaklandState
CAZip Code
94602-2505FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Jews United for JusticeOccupation (for Individual)
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 12 / 2026

Transaction ID : 2745657

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

C. Lubeck, Susan, , ,

Mailing Address 14 Alida Ct

City
OaklandState
CAZip Code
94602-2505FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Jews United for JusticeOccupation (for Individual)
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 30 / 2026

Transaction ID : 2745656

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

150.00

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

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

FOR LINE NUMBER: PAGE 45 OF 212

(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Lyman, Kennie, , ,

Mailing Address 13 Rockwell St

City
Cambridge

State
MA

Zip Code
02139-4430

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

356.50

Date of Receipt

05 / 05 / 2026

Transaction ID : 2743649

Amount of Each Receipt this Period

27.00

☐ Memo Item

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

B. Lyman, Kennie, , ,

Mailing Address 13 Rockwell St

City
Cambridge

State
MA

Zip Code
02139-4430

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.50

Date of Receipt

05 / 20 / 2026

Transaction ID : 2743650

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. Lyman, Kennie, , ,

Mailing Address 13 Rockwell St

City
Cambridge

State
MA

Zip Code
02139-4430

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

381.50

Date of Receipt

05 / 31 / 2026

Transaction ID : 2743648

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

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

52.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 46 OF 212
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Madsen, Sidney, , ,

Mailing Address 840 Snyder Hill Rd

City
IthacaState
NYZip Code
14850-8801FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UC Santa CruzOccupation (for Individual)
Postdoc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 25 / 2026

Transaction ID : 2745033

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Mathews, Guy, , ,

Mailing Address 717 Jackson St

City
PuebloState
COZip Code
81004-1711FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Davis GrahamOccupation (for Individual)
Attorney

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
05 / 10 / 2026

Transaction ID : 2741625

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. Mayrl, William, , ,

Mailing Address 732 Coquina Ct

City
Boca RatonState
FLZip Code
33432-3004FEC 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
05 / 28 / 2026

Transaction ID : 2742922

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

200.00

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Mazow, Erin, , ,

Mailing Address 3700 Hillview St

City
Oakland

State
CA

Zip Code
94602-3333

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 18 / 2026

Transaction ID : 2746695

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. Mcallister, Ryan, , ,

Mailing Address 251 Manor Cir

City
Takoma Park

State
MD

Zip Code
20912-4555

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Capital Home Care

Occupation (for Individual)
Caregiver

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 04 / 2026

Transaction ID : 2744274

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Mccall, Leslie, , ,

Mailing Address 450 Clinton St

City
Brooklyn

State
NY

Zip Code
11231-3400

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
City University of New York

Occupation (for Individual)
Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 20 / 2026

Transaction ID : 2744508

Amount of Each Receipt this Period

65.00

☐ Memo Item

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

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

365.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. mccarthy, Kevin, , ,

Mailing Address 6004 Shore Park Dr

City
Leland

State
NC

Zip Code
28451-6700

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

875.00

Date of Receipt

05 / 29 / 2026

Transaction ID : 2741864

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

B. McCollum, Charles, , ,

Mailing Address 31 W 17th St

City
New York

State
NY

Zip Code
10011-5529

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
New York Film Academy

Occupation (for Individual)
Technical Assistant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

05 / 05 / 2026

Transaction ID : 2743431

Amount of Each Receipt this Period

45.00

☐ Memo Item

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

C. McCord, Justin, , ,

Mailing Address 7140 Bohuslav Rd

City
La Grange

State
TX

Zip Code
78945-5830

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Hunter Pharmacy Services

Occupation (for Individual)
Pharmacist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 15 / 2026

Transaction ID : 2745813

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

220.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 49 OF 212
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. McKinley Jr, Albert, , ,

Mailing Address 112 Ariola Ave

City
PensacolaState
FLZip Code
32503-3624FEC 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 ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 07 / 2026

Transaction ID : 2743966

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. McKinley, Micky, , ,

Mailing Address 31 Moser St

City
NorthamptonState
MAZip Code
01060-3645FEC 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 ▼

900.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 16 / 2026

Transaction ID : 2746098

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. McKinley, Micky, , ,

Mailing Address 31 Moser St

City
NorthamptonState
MAZip Code
01060-3645FEC 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 ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 27 / 2026

Transaction ID : 2746099

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

300.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 50 OF 212
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Mehta, Pooja, , ,

Mailing Address 2 Loring St

City
SomervilleState
MAZip Code
02143-2864FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Cityblock HealthOccupation (for Individual)
Physician executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 23 / 2026

Transaction ID : 2744982

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. Mendelsohn, Tom, , ,

Mailing Address 9 Lincoln Rd

City
BrooklineState
MAZip Code
02445-6804FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Mendelsohn Gittleman & Associates LLCOccupation (for Individual)
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 18 / 2026

Transaction ID : 2741696

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. Merzke, Madison, , ,

Mailing Address 2784 Burnt Mill Rd

City
LexingtonState
KYZip Code
40511-7003FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
A-G AssociatesOccupation (for Individual)
Data Scientist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 03 / 2026

Transaction ID : 2743052

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

400.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Miller, Christine, , ,

Mailing Address 320 17th St S

City
La CrosseState
WIZip Code
54601-4925FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Gundersen healthOccupation (for Individual)
Md

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 21 / 2026

Transaction ID : 2745810

Amount of Each Receipt this Period

27.00

☐ Memo Item

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

B. Miller, Mark, , ,

Mailing Address 9008 Bar K Ranch Rd

City
Lago VistaState
TXZip Code
78645-4131FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
eBayOccupation (for Individual)
Tech Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 02 / 2026

Transaction ID : 2743868

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Mills, Leila, , ,

Mailing Address 737 Olivieri Ln

City
Virginia BeachState
VAZip Code
23455-5730FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TechArk SolutionsOccupation (for Individual)
Account Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 20 / 2026

Transaction ID : 2743300

Amount of Each Receipt this Period

40.00

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

117.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 52 OF 212
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Milly, Sara, , ,Mailing Address 1025 Westview St
Apt ACity
PhiladelphiaState
PAZip Code
19119-3718FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SelfOccupation (for Individual)
Thearpist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 10 / 2026

Transaction ID : 2742464

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Mujan, Edi, , ,

Mailing Address 537 E Van Bibber Ave

City
OrangeState
CAZip Code
92866-2027FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vincor Construction IncOccupation (for Individual)
Construction Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 17 / 2026

Transaction ID : 2746248

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. Mukasa, Sandra, , ,

Mailing Address 3741 S Norton Ave

City
Los AngelesState
CAZip Code
90018-4046FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CA Department of Housing & Community DOccupation (for Individual)
Housing Policy Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 12 / 2026

Transaction ID : 2742602

Amount of Each Receipt this Period

50.00

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

350.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 53 OF 212
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Mullen, Daniel, , ,

Mailing Address 1754 Perch St

City
San PedroState
CAZip Code
90732-4218FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DOTOccupation (for Individual)
Air Traffic Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 14 / 2026

Transaction ID : 2744806

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. Mulowayi, Yves, , ,

Mailing Address 1301 S Quivas St

City
DenverState
COZip Code
80223-3425FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FootbridgeOccupation (for Individual)
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2026

Transaction ID : 2743651

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Neuspiel, Juliana, , ,

Mailing Address 307 7th St

City
BrooklynState
NYZip Code
11215-3279FEC 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 ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 2745859

Amount of Each Receipt this Period

100.00

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

250.00

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

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

FOR LINE NUMBER: PAGE 54 OF 212

(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Omara, Collin, , ,

Mailing Address 2 Dunleary Dr

City
Bear

State
DE

Zip Code
19701-6355

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
National Wildlife Federation

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
05 / 09 / 2026

Transaction ID : 2743547

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. Pantelias, Niki, , ,

Mailing Address 3450 Kingsland Cir

City

Berkeley Lake

State

GA

Zip Code

30096-6170

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Broadcom

Occupation (for Individual)
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
05 / 13 / 2026

Transaction ID : 2742920

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Parker, Adam, , ,

Mailing Address 19 Half Moon HI

City

Acton

State

MA

Zip Code

01720-2448

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
05 / 18 / 2026

Transaction ID : 2746451

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)..... ►

400.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 55 OF 212
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Pasley, Mark, , ,

Mailing Address 3130 California St

City
BerkeleyState
CAZip Code
94703-2371FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SelfOccupation (for Individual)
Massage Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2026**Transaction ID : 2745219**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Pasternak, Stefin, , ,

Mailing Address 400 Temple St

City
RichmondState
VAZip Code
23220-5949FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 21 / 2026**Transaction ID : 2742310**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. Patel, Ujval, , ,

Mailing Address 7412 Kedvale Ave

City
SkokieState
ILZip Code
60076-3802FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MarshOccupation (for Individual)
Operations

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
05 / 07 / 2026**Transaction ID : 2745905**

Amount of Each Receipt this Period

100.00

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

250.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 56 OF 212
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Patterson, Michele, , ,

Mailing Address 1804 Westwind Ct

City
League CityState
TXZip Code
77573-7795FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Brent Patterson ddsOccupation (for Individual)
Accountant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 13 / 2026

Transaction ID : 2746283

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. Penney-Edwards, Robert, , ,

Mailing Address 72 Maple St

City
EasthamptonState
MAZip Code
01027-1755FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EinkOccupation (for Individual)
Electronics technician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 20 / 2026

Transaction ID : 2741933

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Pfau, George, , ,

Mailing Address 131 Ellsworth St

City
San FranciscoState
CAZip Code
94110-5640FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
George PfauOccupation (for Individual)
Artist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 18 / 2026

Transaction ID : 2744395

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

325.00

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

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

FOR LINE NUMBER: PAGE 57 OF 212

(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Phillips, Susan, , ,

Mailing Address 2753 Pheasant Run

City
Cottage Grove

State
WI

Zip Code
53527-9782

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

182.00

Date of Receipt

05 / 05 / 2026

Transaction ID : 2745821

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. Phillips, Susan, , ,

Mailing Address 2753 Pheasant Run

City
Cottage Grove

State
WI

Zip Code
53527-9782

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

190.50

Date of Receipt

05 / 08 / 2026

Transaction ID : 2745822

Amount of Each Receipt this Period

8.50

☐ Memo Item

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

C. Phillips, Susan, , ,

Mailing Address 2753 Pheasant Run

City
Cottage Grove

State
WI

Zip Code
53527-9782

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

200.50

Date of Receipt

05 / 18 / 2026

Transaction ID : 2745819

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

28.50

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

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

FOR LINE NUMBER: PAGE 58 OF 212

(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Phillips, Susan, , ,

Mailing Address 2753 Pheasant Run

City
Cottage Grove

State
WI

Zip Code
53527-9782

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 26 / 2026

Transaction ID : 2745823

Amount of Each Receipt this Period

8.50

☐ Memo Item

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

B. Phillips, Susan, , ,

Mailing Address 2753 Pheasant Run

City
Cottage Grove

State
WI

Zip Code
53527-9782

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2026

Transaction ID : 2745820

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. Pommerenk, Ava, , ,

Mailing Address 1978 Cedar Ave

City
Long Beach

State
CA

Zip Code
90806-5389

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self

Occupation (for Individual)
Life coach

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 16 / 2026

Transaction ID : 2744359

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

118.50

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

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

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

FOR LINE NUMBER: PAGE 59 OF 212

(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Posteraro, Julia, , ,

Mailing Address 4419 Schenley Farms Ter

City
Pittsburgh

State
PA

Zip Code
15213-1207

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Winchester Thurston School

Occupation (for Individual)
Finance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

05 / 15 / 2026

Transaction ID : 2744041

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

B. Posteraro, Julia, , ,

Mailing Address 4419 Schenley Farms Ter

City
Pittsburgh

State
PA

Zip Code
15213-1207

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Winchester Thurston School

Occupation (for Individual)
Finance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

05 / 17 / 2026

Transaction ID : 2744040

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

C. Quilici, Janet, , ,

Mailing Address 36910 Montecito Dr

City
Fremont

State
CA

Zip Code
94536-2621

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 21 / 2026

Transaction ID : 2744103

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

130.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 60 OF 212
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Rabinowitz, Jesse, , ,

Mailing Address 1260 21st St NW

City
WashingtonState
DCZip Code
20036-2300FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
National Homelessness Law CenterOccupation (for Individual)
Comms director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 09 / 2026

Transaction ID : 2746012

Amount of Each Receipt this Period

170.00

☐ Memo Item

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

B. Rainey, Caleb, , ,

Mailing Address 1703 Logan Ave

City
San DiegoState
CAZip Code
92113-1051FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Arts OrgOccupation (for Individual)
Fundraiser

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 17 / 2026

Transaction ID : 2744312

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

C. Ran, David, , ,Mailing Address 171 E 84th St
Unit 5JCity
ChicagoState
ILZip Code
60619-5604FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tanius TechnologyOccupation (for Individual)
Trader

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
05 / 31 / 2026

Transaction ID : 2741919

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

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

410.00

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

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

FOR LINE NUMBER: PAGE 61 OF 212

(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Reilly, Erica, , ,

Mailing Address 1107 NE Revere Ave

City
Bend

State
OR

Zip Code
97701-4149

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Spork LLC

Occupation (for Individual)
Restaurateur

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 23 / 2026

Transaction ID : 2742728

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Reilly, William, , ,

Mailing Address 2227 Observatory Ave

City

Los Angeles

State

CA

Zip Code

90027-1333

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 28 / 2026

Transaction ID : 2742716

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Reinhard, Theresa, , ,

Mailing Address 89 Turner St

Apt 3

City

Boston

State

MA

Zip Code

02135-2890

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Avaap

Occupation (for Individual)
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 18 / 2026

Transaction ID : 2741948

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)..... ►

600.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 62 OF 212
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Rianda, Mike, , ,

Mailing Address 1800 N Normandie Ave

City
Los AngelesState
CAZip Code
90027-3900FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DirectorOccupation (for Individual)
Netflix

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2026

Transaction ID : 2745553

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Richards, Mariah, , ,

Mailing Address 22860 Cherry Hill St

City
DearbornState
MIZip Code
48124-1021FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FordOccupation (for Individual)
Job

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 05 / 2026

Transaction ID : 2743051

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Romriell, Nathan, , ,

Mailing Address 3806 SE 41st Ave

City
PortlandState
ORZip Code
97202-1717FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AdobeOccupation (for Individual)
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 04 / 2026

Transaction ID : 2741590

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

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

175.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 63 OF 212
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Royce, Sarah, , ,

Mailing Address 100 Hazel Ln

City
PiedmontState
CAZip Code
94611-4033FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
noneOccupation (for Individual)
retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 01 / 2026

Transaction ID : 2745599

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. Royce, Sarah, , ,

Mailing Address 100 Hazel Ln

City
PiedmontState
CAZip Code
94611-4033FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
noneOccupation (for Individual)
retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 28 / 2026

Transaction ID : 2745600

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. Ruby, Kenneth, , ,Mailing Address 18 Tiffany Rd
Apt 10City
SalemState
NHZip Code
03079-3667FEC 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 ▼

650.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 26 / 2026

Transaction ID : 2741443

Amount of Each Receipt this Period

400.00

☐ Memo Item

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

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

510.00

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

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

FOR LINE NUMBER: PAGE 64 OF 212

(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Ruffalo, Mark, , ,

Mailing Address 200 Park Ave S
FI 8

City
New York

State
NY

Zip Code
10003-1526

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self

Occupation (for Individual)
Actor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

125.00

Date of Receipt

05 / 07 / 2026

Transaction ID : 2742081

Amount of Each Receipt this Period

125.00

☐ Memo Item

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

B. Ruffalo, Mark, , ,

Mailing Address 200 Park Ave S
FI 8

City
New York

State
NY

Zip Code
10003-1526

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self

Occupation (for Individual)
Actor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

05 / 21 / 2026

Transaction ID : 2742082

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. Russell, Louise, , ,

Mailing Address 240 Sinclair Pl

City
Westfield

State
NJ

Zip Code
07090-3122

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
University of Pennsylvania

Occupation (for Individual)
Adjunct Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 07 / 2026

Transaction ID : 2742220

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)..... ►

875.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 65 OF 212
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Ruzek, Tracey, , ,

Mailing Address 1015 W Drayton St

City
FerndaleState
MIZip Code
48220-2728FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Ruzek enterprises llcOccupation (for Individual)
Transportation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 10 / 2026

Transaction ID : 2742533

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. Sadinoff, Deborah, , ,Mailing Address 445 W 23rd St
Apt 12DCity
New YorkState
NYZip Code
10011-1450FEC 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
05 / 26 / 2026

Transaction ID : 2742979

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

C. Schaetti, Barbara, , ,

Mailing Address 7180 Maxwellton Rd

City
ClintonState
WAZip Code
98236-8813FEC 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 ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 07 / 2026

Transaction ID : 2744733

Amount of Each Receipt this Period

100.00

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

275.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Schexnider, Alvin, , ,

Mailing Address 1026 N Lombard Ave

City
Oak ParkState
ILZip Code
60302-1435FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Capital OneOccupation (for Individual)
Designer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2026

Transaction ID : 2745492

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. Schneider, Laura, , ,

Mailing Address 11111 Tuttlehill Rd

City
MilanState
MIZip Code
48160-9142FEC 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 ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 27 / 2026

Transaction ID : 2746056

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Scruggs, Sarah, , ,Mailing Address 1436 W St NW
Apt 108City
WashingtonState
DCZip Code
20009-5825FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MANNA IncOccupation (for Individual)
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 24 / 2026

Transaction ID : 2741902

Amount of Each Receipt this Period

75.00

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

225.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. See, Jill, , ,

Mailing Address 505 Drew Ave

City
SwarthmoreState
PAZip Code
19081-2409FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ParexelOccupation (for Individual)
Medical Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 13 / 2026**Transaction ID : 2741991**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. Shepperd, Leah, , ,

Mailing Address 1836 Sepviva St

City
PhiladelphiaState
PAZip Code
19125-2433FEC 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 ▼

325.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 27 / 2026**Transaction ID : 2745377**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Silverton, Laura, , ,

Mailing Address 4622 S Lucile St

City
SeattleState
WAZip Code
98118-2423FEC 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 ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2026**Transaction ID : 2742066**

Amount of Each Receipt this Period

50.00

☐ Memo Item**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 68 OF 212
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Silverton, Laura, , ,

Mailing Address 4622 S Lucile St

City
SeattleState
WAZip Code
98118-2423FEC 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 ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2026

Transaction ID : 2742067

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Singh, Brianna, , ,

Mailing Address 2210 F St

City
SacramentoState
CAZip Code
95816-3540FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Geosyntec ConsultantsOccupation (for Individual)
Civil engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

306.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 2743711

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

C. Singhal, Nikita, , ,Mailing Address 223 Prospect St
1City
CambridgeState
MAZip Code
02139-1217FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
The Chirag FoundationOccupation (for Individual)
Philanthropy

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 16 / 2026

Transaction ID : 2741775

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

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

325.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 69 OF 212
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Smith, Gregory, , ,

Mailing Address 2140 Volpp St

City
West LinnState
ORZip Code
97068-4614FEC 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 ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 16 / 2026

Transaction ID : 2743970

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. Smith, Ted, , ,

Mailing Address 465 S 15th St

City
San JoseState
CAZip Code
95112-2240FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
selfOccupation (for Individual)
environmental consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 24 / 2026

Transaction ID : 2745138

Amount of Each Receipt this Period

27.00

☐ Memo Item

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

C. Smith, Ted, , ,

Mailing Address 465 S 15th St

City
San JoseState
CAZip Code
95112-2240FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
selfOccupation (for Individual)
environmental consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 28 / 2026

Transaction ID : 2745139

Amount of Each Receipt this Period

50.00

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

177.00

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

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

FOR LINE NUMBER: PAGE 70 OF 212

(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Smullin, Alix, , ,

Mailing Address 22 Woodbine Ave

City
Swampscott

State
MA

Zip Code
01907-2658

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 20 / 2026

Transaction ID : 2743957

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. Snow, Katherine, , ,

Mailing Address 3094 Berkshire Rd

City
Cleveland Heights

State
OH

Zip Code
44118-2459

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Katherine Snow

Occupation (for Individual)
artist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 15 / 2026

Transaction ID : 2744176

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Soto, Michelle, , ,

Mailing Address 949 Mercer Rd

City
Butler

State
PA

Zip Code
16001-1150

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self

Occupation (for Individual)
Farmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

05 / 20 / 2026

Transaction ID : 2743953

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

250.00

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

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

FOR LINE NUMBER: PAGE 71 OF 212

(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Soulos, Irene, , ,

Mailing Address 16 Alden St

City
Greenfield

State
MA

Zip Code
01301-1621

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Valley Medical Group

Occupation (for Individual)
Physician Assistant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 27 / 2026

Transaction ID : 2743926

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. Spence, Shannon, , ,

Mailing Address 2310 Washington Blvd

City
Arlington

State
VA

Zip Code
22201-1114

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PWWater

Occupation (for Individual)
Utility Construction Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 17 / 2026

Transaction ID : 2744340

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Stoops, Jamie, , ,

Mailing Address 4918 W 43rd St

City
Houston

State
TX

Zip Code
77092-5245

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Lone Star College

Occupation (for Individual)
Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

365.00

Date of Receipt

05 / 12 / 2026

Transaction ID : 2746307

Amount of Each Receipt this Period

365.00

☐ Memo Item

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

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

515.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 72 OF 212
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☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Stranahan, Molly, , ,

Mailing Address 7451 N Whisper Canyon Pl

City
TucsonState
AZZip Code
85718-7808FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
selfOccupation (for Individual)
happiness facilitator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 07 / 2026

Transaction ID : 2744621

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. Sullivan, Karen, , ,Mailing Address 30 Carmine St
Apt 2BCity
New YorkState
NYZip Code
10014-4405FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Queens College/CUNYOccupation (for Individual)
Teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

188.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 10 / 2026

Transaction ID : 2745954

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

C. Sullivan, Karen, , ,Mailing Address 30 Carmine St
Apt 2BCity
New YorkState
NYZip Code
10014-4405FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Queens College/CUNYOccupation (for Individual)
Teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2026

Transaction ID : 2745955

Amount of Each Receipt this Period

27.00

☐ Memo Item

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

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

147.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 73 OF 212

(check only one)

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

Working Families Party PAC

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

A. Talcott, Richard, , ,

Mailing Address 14248 River Hills Pkwy

City
DaytonState
MNZip Code
55327-6100FEC 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
05		17		2026

Transaction ID : 2744000

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. Tilley, Ron, , ,

Mailing Address 2016 Green St

City
HarrisburgState
PAZip Code
17102-2127FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UPMCOccupation (for Individual)
Chaplain

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

321.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		18		2026

Transaction ID : 2741944

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

C. Tonkovich, Amanda, , ,

Mailing Address 2525 N Derbigny St

City
New OrleansState
LAZip Code
70117-7722FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
New Orleans Family Justice CenterOccupation (for Individual)
Social work

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		01		2026

Transaction ID : 2745449

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

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

160.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 74 OF 212
(check only one)

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

Working Families Party PAC

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

A. Tonkovich, Amanda, , ,

Mailing Address 2525 N Derbigny St

City
New OrleansState
LAZip Code
70117-7722FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
New Orleans Family Justice CenterOccupation (for Individual)
Social work

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 27 / 2026

Transaction ID : 2745450

Amount of Each Receipt this Period

27.00

☐ Memo Item

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

B. Troost, Hazel, , ,Mailing Address 1656 N Rockwell St
Apt 1City
ChicagoState
ILZip Code
60647-2397FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GoogleOccupation (for Individual)
Software Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 05 / 2026

Transaction ID : 2741840

Amount of Each Receipt this Period

76.00

☐ Memo Item

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

C. True, Jessica, , ,

Mailing Address 3139 Rodney Ln

City
CaledoniaState
WIZip Code
53406-1630FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
OracleOccupation (for Individual)
IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 06 / 2026

Transaction ID : 2745929

Amount of Each Receipt this Period

50.00

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

153.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 75 OF 212
(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Tupper, Alan, , ,

Mailing Address 576 Cundys Harbor Rd

City
HarpswellState
MEZip Code
04079-4311FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Alan Tupper

Occupation (for Individual)

Artist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 14 / 2026

Transaction ID : 2744788

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Tygart, Aaron, , ,

Mailing Address 6405 SE Tibbetts St

City
PortlandState
ORZip Code
97206-1915FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Cisco Systems, Inc.

Occupation (for Individual)

Software Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 21 / 2026

Transaction ID : 2744068

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. Vo, Vivian, , ,

Mailing Address 1964 Finger Peak Way

City
AntiochState
CAZip Code
94531-9134FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AB staffing

Occupation (for Individual)

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 04 / 2026

Transaction ID : 2743723

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

250.00

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

FOR LINE NUMBER: PAGE 76 OF 212

(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Vogt, Austin, , ,

Mailing Address 7017 Woodbine Ave

City
PhiladelphiaState
PAZip Code
19151-2330FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Genentech IncOccupation (for Individual)
Scientist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 14 / 2026

Transaction ID : 2743394

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Wagner, Kim, , ,

Mailing Address 1327 W Norwood St

City
ChicagoState
ILZip Code
60660-2509FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ArchitectureOccupation (for Individual)
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 2742965

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

C. Wallace, Carla, , ,

Mailing Address 120 N Jane St

City
LouisvilleState
KYZip Code
40206-2412FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Wallace Farm LLCOccupation (for Individual)
Managing Member

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2026

Transaction ID : 2741569

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)..... ►

340.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 77 OF 212
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Weber, Robert, , ,

Mailing Address 5467 Wetlands Dr

City
FrederickState
COZip Code
80504-5806FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Netography

Occupation (for Individual)

Software Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2026

Transaction ID : 2745803

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. Weiner, Gabe, , ,Mailing Address 2072 Frederick Douglass Blvd
Apt 3BCity
New YorkState
NYZip Code
10026-3384FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self

Occupation (for Individual)

Programmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 26 / 2026

Transaction ID : 2743316

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. Weinstock, Jonathan, , ,

Mailing Address 2208 7th St

City
BerkeleyState
CAZip Code
94710-2305FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Edgewood

Occupation (for Individual)

Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 05 / 2026

Transaction ID : 2745111

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

375.00

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

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

FOR LINE NUMBER: PAGE 78 OF 212

(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Weinstock, Jonathan, , ,

Mailing Address 2208 7th St

City
Berkeley

State
CA

Zip Code
94710-2305

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Edgewood

Occupation (for Individual)
Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.50

Date of Receipt

05 / 07 / 2026

Transaction ID : 2745112

Amount of Each Receipt this Period

13.50

☐ Memo Item

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

B. Weinstock, Jonathan, , ,

Mailing Address 2208 7th St

City
Berkeley

State
CA

Zip Code
94710-2305

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Edgewood

Occupation (for Individual)
Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

358.50

Date of Receipt

05 / 13 / 2026

Transaction ID : 2745109

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. Weinstock, Jonathan, , ,

Mailing Address 2208 7th St

City
Berkeley

State
CA

Zip Code
94710-2305

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Edgewood

Occupation (for Individual)
Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

372.00

Date of Receipt

05 / 16 / 2026

Transaction ID : 2745113

Amount of Each Receipt this Period

13.50

☐ Memo Item

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

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

52.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 79 OF 212
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Weinstock, Jonathan, , ,

Mailing Address 2208 7th St

City
BerkeleyState
CAZip Code
94710-2305FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EdgewoodOccupation (for Individual)
Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

382.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 20 / 2026

Transaction ID : 2745114

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. Weinstock, Jonathan, , ,

Mailing Address 2208 7th St

City
BerkeleyState
CAZip Code
94710-2305FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EdgewoodOccupation (for Individual)
Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 27 / 2026

Transaction ID : 2745110

Amount of Each Receipt this Period

3.00

☐ Memo Item

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

C. Weinstock, Jonathan, , ,

Mailing Address 2208 7th St

City
BerkeleyState
CAZip Code
94710-2305FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EdgewoodOccupation (for Individual)
Program Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 28 / 2026

Transaction ID : 2745115

Amount of Each Receipt this Period

25.00

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

38.00

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

FOR LINE NUMBER: PAGE 80 OF 212

(check only one)

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

Working Families Party PAC

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

A. Wofsy, Judith, , ,

Mailing Address 821 Ramona Ave

City
AlbanyState
CAZip Code
94706-1819FEC 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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 06 / 2026

Transaction ID : 2745154

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Wootres, Glenn, , ,

Mailing Address 99 Algonquin Park

City
PlattsburghState
NYZip Code
12901-1101FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BETA TechnologiesOccupation (for Individual)
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 30 / 2026

Transaction ID : 2742295

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Worden, Jarod, , ,

Mailing Address 7931 Bolling Dr

City
AlexandriaState
VAZip Code
22308-1232FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NISTOccupation (for Individual)
Scientist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 2742919

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

150.00

21150.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 81 OF 212
(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Allen, Meg, , ,

Mailing Address 401 S Quitman St

City
DenverState
COZip Code
80219-2533FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

City of Aurora

Occupation (for Individual)

Neighborhood Liaison for Immigrant & F

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 04 / 2026

Transaction ID : 2746772

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Contribution to non-contribution account

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

B. Altschuler, Alan, , ,Mailing Address 160 Riverside Dr
Apt 9BCity
New YorkState
NYZip Code
10024-2111FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self

Occupation (for Individual)

Actor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 2746724

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Contribution to non-contribution account

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

C. AMERICAN COMMITTEE FOR MIDDLE EAST RIGHTS - MIDDLE EAST RIGHTS & INTEGRITY PAC (ACMER MERIT PAC)

Mailing Address 1380 Monroe St NW

City
WashingtonState
DCZip Code
20010-3452FEC ID number of contributing
federal political committee.

C C00945550

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2026

Transaction ID : 2748583

Amount of Each Receipt this Period

20000.00

☐ Memo Item

Contribution to non-contribution account

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

28500.00

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

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

FOR LINE NUMBER: PAGE 82 OF 212
(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Asian Pacific Islander Political Alliance

Mailing Address 1528 Walnut St
Ste 808

City
Philadelphia

State
PA

Zip Code
19102-3608

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 ▼

15000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2026

Transaction ID : 2748575

Amount of Each Receipt this Period

15000.00

☐ Memo Item

Contribution to non-contribution account

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

B. Biegelsen, Charlotte, , ,

Mailing Address 200 Mimosa Way

City
Portola Valley

State
CA

Zip Code
94028-7432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Menlo Park City School District

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 27 / 2026

Transaction ID : 2746757

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Contribution to non-contribution account

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

C. Bravo, Dominique, , ,

Mailing Address 887 Union St

City
Brooklyn

State
NY

Zip Code
11215-1401

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self Employed

Occupation (for Individual)
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 18 / 2026

Transaction ID : 2748571

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Contribution to non-contribution account

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

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

25000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 83 OF 212
(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Brotsky, Louise, , ,

Mailing Address 1713 Sanchez St

City
San FranciscoState
CAZip Code
94131-2740FEC 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 ▼

20000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 11 / 2026

Transaction ID : 2746791

Amount of Each Receipt this Period

20000.00

☐ Memo Item

Contribution to non-contribution account

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

B. Build New EnglandMailing Address 410 S Main St
Ste 2City
ProvidenceState
RIZip Code
02903-7124FEC 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 ▼

15000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 05 / 2026

Transaction ID : 2748574

Amount of Each Receipt this Period

15000.00

☐ Memo Item

Contribution to non-contribution account

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

C. California Working Families PartyMailing Address 77 Sands St
Fl 6City
BrooklynState
NYZip Code
11201-1431FEC 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 ▼

16767.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 04 / 2026

Transaction ID : 2748769

Amount of Each Receipt this Period

16767.63

☐ Memo ItemIn-kind: Mail (IDs 500002536, 500002537, 500002538)
from non-contribution account

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

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

51767.63

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 84 OF 212
(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Central Valley for Working FamiliesMailing Address 360 E 2nd St
Ste 600City
Los AngelesState
CAZip Code
90012-4270FEC ID number of contributing
federal political committee.**C** C00936831

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

22250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 01 / 2026**Transaction ID : 2748556**

Amount of Each Receipt this Period

20000.00

☐ Memo Item

Contribution to non-contribution account

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

B. Communications Workers of America District 1Mailing Address 118 S Elliott Pl
Apt 3City
BrooklynState
NYZip Code
11217-1527FEC 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 ▼

15000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 28 / 2026**Transaction ID : 2748582**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

Contribution to non-contribution account

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

C. Corpus, Janet, , ,

Mailing Address 7321 Boyer St

City
PhiladelphiaState
PAZip Code
19119-1707FEC ID number of contributing
federal political committee.**C**

Name of Employer (for Individual)

Occupation (for Individual)

Not Employed

Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 2746769**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Contribution to non-contribution account

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

36000.00

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

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

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

FOR LINE NUMBER: PAGE 85 OF 212

(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Cramer, Tom, , ,

Mailing Address 11 Riverside Dr

City
New York

State
NY

Zip Code
10023-2504

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not employed

Occupation (for Individual)
Not employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 2746786

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Contribution to non-contribution account

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

B. Davoodi, Mohammed, , ,

Mailing Address 668 San Juan Ave

City
Venice

State
CA

Zip Code
90291-3444

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Soteri

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7000.00

Date of Receipt

05 / 29 / 2026

Transaction ID : 2746780

Amount of Each Receipt this Period

7000.00

☐ Memo Item

Contribution to non-contribution account

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

C. Democracy PAC

Mailing Address 1032 15th St NW
Ste 247

City
Washington

State
DC

Zip Code
20005-1502

FEC ID number of contributing
federal political committee.

C C00693382

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4000000.00

Date of Receipt

05 / 28 / 2026

Transaction ID : 2748566

Amount of Each Receipt this Period

2000000.00

☐ Memo Item

Contribution to non-contribution account

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

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

2012000.00

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

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

FOR LINE NUMBER: PAGE 86 OF 212

(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Egerman, Mark, D, ,

Mailing Address 181 Saint Johns Pl

City
Brooklyn

State
NY

Zip Code
11217-3405

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Retired

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 01 / 2026

Transaction ID : 2746790

Amount of Each Receipt this Period

20000.00

☐ Memo Item

Contribution to non-contribution account

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

B. Fleming, Joel, , ,

Mailing Address 50 Causeway St
Apt 1713

City
Boston

State
MA

Zip Code
02114-1674

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Equity Litigation Group LLP

Occupation (for Individual)
Lawyer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 05 / 2026

Transaction ID : 2748545

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Contribution to non-contribution account

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

C. Freedom PA

Mailing Address 1414 Brighton Rd

City
Pittsburgh

State
PA

Zip Code
15212-4478

FEC ID number of contributing
federal political committee.

C C00902189

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

23000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 13 / 2026

Transaction ID : 2748555

Amount of Each Receipt this Period

15000.00

☐ Memo Item

Contribution to non-contribution account

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

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

45000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 87 OF 212
(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Garrett, Lucas, , ,

Mailing Address 737 Ferncliff Ave NE

City
Bainbridge IslandState
WAZip Code
98110-2931FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Schroeter Goldmark & BenderOccupation (for Individual)
attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 2746782**

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Contribution to non-contribution account

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

B. Goldfein, Joshua, , ,Mailing Address 223 E 25th St
Apt 4City
New YorkState
NYZip Code
10010-3196FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Legal Aid SocietyOccupation (for Individual)
lawyer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 28 / 2026**Transaction ID : 2746773**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Contribution to non-contribution account

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

C. Gores, Henrietta Drewry, , ,

Mailing Address 3125 Wold Ave

City
CincinnatiState
OHZip Code
45207-1911FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Kohnen & Patton LLPOccupation (for Individual)
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

21833.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 05 / 2026**Transaction ID : 2746792**

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Contribution to non-contribution account

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

14500.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 88 OF 212
(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Grumbach, Adam, , ,

Mailing Address 344 16th St

City
BrooklynState
NYZip Code
11215-5614FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self employedOccupation (for Individual)
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 12 / 2026**Transaction ID : 2746730**

Amount of Each Receipt this Period

2600.00

☐ Memo Item

Contribution to non-contribution account

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

B. Harrigan, Alexis, , ,

Mailing Address 4800 E Dartmouth Ave

City
DenverState
COZip Code
80222-7332FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Robin Merger Corp.Occupation (for Individual)
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 01 / 2026**Transaction ID : 2746779**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Contribution to non-contribution account

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

C. Hess, Lawrence, E, ,

Mailing Address 6309 Cypress Point Rd

City
San DiegoState
CAZip Code
92120-3816FEC 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 ▼

15000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 21 / 2026**Transaction ID : 2748546**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

Contribution to non-contribution account

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

18100.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 89 OF 212
(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Jane Fonda Climate PACMailing Address 600 Pennsylvania Ave SE
Unit 15180City
WashingtonState
DCZip Code
20003-7508FEC ID number of contributing
federal political committee.**C** C00806893

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 2748551**

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Contribution to non-contribution account

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

B. JNP Services LLC

Mailing Address PO Box 404

City
StandishState
MEZip Code
04084-0404FEC 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 ▼

2000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2026**Transaction ID : 2748579**

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Contribution to non-contribution account

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

C. Jordan/Delaney Family TrustMailing Address 436 14th St
Ste 1417City
OaklandState
CAZip Code
94612-2716FEC 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 ▼

250000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 04 / 2026**Transaction ID : 2746788**

Amount of Each Receipt this Period

250000.00

☐ Memo Item

Contribution to non-contribution account

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

262000.00

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

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

FOR LINE NUMBER: PAGE 90 OF 212

(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Justice Democrats

Mailing Address 1390 Columbia Ave
261

City
Lancaster

State
PA

Zip Code
17603-4743

FEC ID number of contributing
federal political committee.

C C00630665

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

05 / **26** / **2026**

Transaction ID : 2748580

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Contribution to non-contribution account

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

B. Kamens, Kim, , ,

Mailing Address PO Box 1557

City

Pennington

State
NJ

Zip Code
08534-0743

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Amuneal

Occupation (for Individual)
sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / **06** / **2026**

Transaction ID : 2746756

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Contribution to non-contribution account

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

C. Kamens, Kim, , ,

Mailing Address 622 Fitzwater St

City

Philadelphia

State
PA

Zip Code
19147-2939

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Amuneal

Occupation (for Individual)
sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / **07** / **2026**

Transaction ID : 2746754

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Contribution to non-contribution account

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

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

5500.00

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

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

FOR LINE NUMBER: PAGE 91 OF 212

(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Kamens, Kim, , ,

Mailing Address PO Box 1557

City
Pennington

State
NJ

Zip Code
08534-0743

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Amuneal

Occupation (for Individual)
sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

05 / 07 / 2026

Transaction ID : 2746755

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Contribution to non-contribution account

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

B. Keenan, Edward, , ,

Mailing Address 8 Spruce St
Apt 55J

City
New York

State
NY

Zip Code
10038-5239

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Keenan & Bhatia LLC

Occupation (for Individual)
Workers Rights Trial Lawyer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

05 / 31 / 2026

Transaction ID : 2746751

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Contribution to non-contribution account

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

C. Keller, Matthew, , ,

Mailing Address 2054 S Williams St

City
Denver

State
CO

Zip Code
80210-3325

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self

Occupation (for Individual)
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

8500.00

Date of Receipt

05 / 14 / 2026

Transaction ID : 2746784

Amount of Each Receipt this Period

8500.00

☐ Memo Item

Contribution to non-contribution account

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

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

19500.00

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

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

FOR LINE NUMBER: PAGE 92 OF 212

(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Kogod, Lauren, , ,

Mailing Address 319 W 104th St

City
New York

State
NY

Zip Code
10025-4132

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Cooper Union

Occupation (for Individual)
Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

05 / 18 / 2026

Transaction ID : 2746760

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Contribution to non-contribution account

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

B. Lasana, Primo, , ,

Mailing Address 35 Crown St

City
Brooklyn

State
NY

Zip Code
11225-1854

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
iMentor

Occupation (for Individual)
Non-Profit

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 26 / 2026

Transaction ID : 2746771

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Contribution to non-contribution account

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

C. Latino Victory Fund

Mailing Address PO Box 34104

City
Washington

State
DC

Zip Code
20043-4104

FEC ID number of contributing
federal political committee.

C C00562777

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

05 / 26 / 2026

Transaction ID : 2748557

Amount of Each Receipt this Period

25000.00

☐ Memo Item

Contribution to non-contribution account

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

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

31000.00

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

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

FOR LINE NUMBER: PAGE 93 OF 212

(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Leaders We Deserve PAC

Mailing Address 611 Pennsylvania Ave SE
192

City
Washington

State
DC

Zip Code
20003-4303

FEC ID number of contributing
federal political committee.

C

C00843110

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5750.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 26 / 2026

Transaction ID : 2748568

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Contribution to non-contribution account

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

B. Mahon, Annie, , ,

Mailing Address 3703 Northampton St NW

City
Washington

State
DC

Zip Code
20015-2529

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self

Occupation (for Individual)
Meditation Teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2026

Transaction ID : 2746793

Amount of Each Receipt this Period

225000.00

☐ Memo Item

Contribution to non-contribution account

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

C. Maine People's Alliance

Mailing Address 565 Congress St
Ste 200

City
Portland

State
ME

Zip Code
04101-3315

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 ▼

25000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 29 / 2026

Transaction ID : 2748567

Amount of Each Receipt this Period

25000.00

☐ Memo Item

Contribution to non-contribution account

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

253500.00

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 94 OF 212
(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Make the Road Action Political Committee

Mailing Address 301 Grove St

City
BrooklynState
NYZip Code
11237-5664FEC ID number of contributing
federal political committee.

C

C00689745

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 18 / 2026

Transaction ID : 2748553

Amount of Each Receipt this Period

15000.00

☐ Memo Item

Contribution to non-contribution account

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

B. Mirabelli, Andre, , ,

Mailing Address 70 Wooster St

City
New YorkState
NYZip Code
10012-4348FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)
Math modeler

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
05 / 11 / 2026

Transaction ID : 2746707

Amount of Each Receipt this Period

100.00

☐ Memo Item

Contribution to non-contribution account

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

C. Misner, Christopher, , ,

Mailing Address 3125 Wold Ave

City
CincinnatiState
OHZip Code
45207-1911FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 18 / 2026

Transaction ID : 2746789

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Contribution to non-contribution account

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

25100.00

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

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

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

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Moammar, Haifaa, , ,

Mailing Address 6413 Hannum Ave

City
Culver City

State
CA

Zip Code
90230-6135

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

05 / **16** / **2026**

Transaction ID : 2746770

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Contribution to non-contribution account

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

B. MOVEMENT VOTER PAC

Mailing Address PO Box 1719

City
Northampton

State
MA

Zip Code
01061-1719

FEC ID number of contributing
federal political committee.

C C00728360

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

860000.00

Date of Receipt

05 / **07** / **2026**

Transaction ID : 2748564

Amount of Each Receipt this Period

150000.00

☐ Memo Item

Contribution to non-contribution account

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

C. MOVEMENT VOTER PAC

Mailing Address PO Box 1719

City
Northampton

State
MA

Zip Code
01061-1719

FEC ID number of contributing
federal political committee.

C C00728360

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1160000.00

Date of Receipt

05 / **11** / **2026**

Transaction ID : 2748565

Amount of Each Receipt this Period

300000.00

☐ Memo Item

Contribution to non-contribution account

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

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

460000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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(check only one)

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

Working Families Party PAC

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

A. MOVEMENT VOTER PAC

Mailing Address PO Box 1719

City
NorthamptonState
MAZip Code
01061-1719FEC ID number of contributing
federal political committee.**C**

C00728360

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1230000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 13 / 2026

Transaction ID : 2748562

Amount of Each Receipt this Period

70000.00

☐ Memo Item

Contribution to non-contribution account

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

B. National Nurses United for Patient ProtectionMailing Address 8455 Colesville Rd
Ste 1100City
Silver SpringState
MDZip Code
20910-5188FEC ID number of contributing
federal political committee.**C**

C00490375

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2026

Transaction ID : 2748563

Amount of Each Receipt this Period

100000.00

☐ Memo Item

Contribution to non-contribution account

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

C. NATIONAL UNION OF HEALTHCARE WORKERS FEDERAL COMMITTEE ON POLITICAL EDUCATIONMailing Address 1700 Tribute Rd
Ste 201City
SacramentoState
CAZip Code
95815-4415FEC ID number of contributing
federal political committee.**C**

C00461418

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 2748558

Amount of Each Receipt this Period

25000.00

☐ Memo Item

Contribution to non-contribution account

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

195000.00

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

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

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

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. No Dem Left Behind PAC

Mailing Address 1030 15th St NW

City
Washington

State
DC

Zip Code
20005-1503

FEC ID number of contributing
federal political committee.

C C00758219

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

05 / **26** / **2026**

Transaction ID : 2748554

Amount of Each Receipt this Period

15000.00

☐ Memo Item

Contribution to non-contribution account

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

B. NRDC Action Votes

Mailing Address 40 W 20th St
FI 11

City
New York

State
NY

Zip Code
10011-4231

FEC ID number of contributing
federal political committee.

C C00740225

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

05 / **22** / **2026**

Transaction ID : 2748561

Amount of Each Receipt this Period

50000.00

☐ Memo Item

Contribution to non-contribution account

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

C. Ochshorn, Susan, , ,

Mailing Address 878 W End Ave

City
New York

State
NY

Zip Code
10025-4966

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

05 / **28** / **2026**

Transaction ID : 2748544

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Contribution to non-contribution account

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

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

70000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 98 OF 212
(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Peratis, Kathleen, , ,Mailing Address 175 W 93rd St
Ph CCity
New YorkState
NYZip Code
10025-9348FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
selfOccupation (for Individual)
Lawyer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 13 / 2026**Transaction ID : 2746774**

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Contribution to non-contribution account

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

B. Phillips, Joshua, , ,

Mailing Address 1143 S Saint Paul St

City
DenverState
COZip Code
80210-2033FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
High Line Canal Conservancy, Inc.Occupation (for Individual)
Urban Planner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 12 / 2026**Transaction ID : 2748572**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

Contribution to non-contribution account

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

C. Preston-Werner, Theresa, , ,Mailing Address 314 Lytton Ave
CACity
Palo AltoState
CAZip Code
94301-1430FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Self EmployedOccupation (for Individual)
Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 19 / 2026**Transaction ID : 2751453**

Amount of Each Receipt this Period

25000.00

☐ Memo Item

Contribution to non-contribution account

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

50000.00

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

Use separate schedule(s)
for each category of the
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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Pritzker, Regan, , ,

Mailing Address 1 Letterman Dr
Ste C4-420

City
San Francisco

State
CA

Zip Code
94129-1494

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tao Capital

Occupation (for Individual)
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

05 / **29** / **2026**

Transaction ID : 2748549

Amount of Each Receipt this Period

100000.00

☐ Memo Item

Contribution to non-contribution account

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

B. PROGRESSIVE ERA PAC

Mailing Address 456 Montgomery St
Ste 1350

City
San Francisco

State
CA

Zip Code
94104-1265

FEC ID number of contributing
federal political committee.

C C00822932

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

47250.00

Date of Receipt

05 / **05** / **2026**

Transaction ID : 2748559

Amount of Each Receipt this Period

30000.00

☐ Memo Item

Contribution to non-contribution account

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

C. Rashida Tlaib for Congress

Mailing Address PO Box 32777

City
Detroit

State
MI

Zip Code
48232-0777

FEC ID number of contributing
federal political committee.

C C00668608

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

05 / **18** / **2026**

Transaction ID : 2748560

Amount of Each Receipt this Period

50000.00

☐ Memo Item

Contribution to non-contribution account

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

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

180000.00

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

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

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Rosin, Pamela, , ,

Mailing Address 874 46th St

City
Oakland

State
CA

Zip Code
94608-3416

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
self

Occupation (for Individual)
psychotherapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

05 / **26** / **2026**

Transaction ID : 2748548

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Contribution to non-contribution account

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

B. Sacramento People Power Federal PAC

Mailing Address 515 S Figueroa St
Ste 1110

City
Los Angeles

State
CA

Zip Code
90071-3314

FEC ID number of contributing
federal political committee.

C C00945683

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

05 / **29** / **2026**

Transaction ID : 2748569

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Contribution to non-contribution account

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

C. Sagner, Deborah, , ,

Mailing Address 210 S 25th St
Unit 1503

City
Philadelphia

State
PA

Zip Code
19103-5878

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not Employed

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

05 / **06** / **2026**

Transaction ID : 2746768

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Contribution to non-contribution account

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

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

16000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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☐ 11a	☐ 11b	☐ 11c	☐ 12	☒ 17
☐ 13	☐ 14	☐ 15	☐ 16	

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Schaffer, Katrina, , ,Mailing Address 440 N Barranca Ave
2452City
CovinaState
CAZip Code
91723-1722FEC ID number of contributing
federal political committee.**C**

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Sign Language Interpreter

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 21 / 2026**Transaction ID : 2748543**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Contribution to non-contribution account

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

B. Schierenbeck, Alec, , ,

Mailing Address 658 10th St

City

Brooklyn

State

NY

Zip Code

11215-4502

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

Name of Employer (for Individual)

City of New York

Occupation (for Individual)

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 19 / 2026**Transaction ID : 2746783**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Contribution to non-contribution account

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

C. Seed the Vote

Mailing Address 1212 Broadway

City

Oakland

State

CA

Zip Code

94612-1805

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 ▼

39786.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 19 / 2026**Transaction ID : 2749287**

Amount of Each Receipt this Period

18500.00

☐ Memo ItemIn-kind contribution-Travel & lodging from Non-
Contribution account**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

24500.00

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

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

FOR LINE NUMBER: PAGE 102 OF 212

(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. Smiley, David, , ,

Mailing Address 319 W 104th St

City
New York

State
NY

Zip Code
10025-4132

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Columbia University

Occupation (for Individual)
Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

05 / 18 / 2026

Transaction ID : 2746759

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Contribution to non-contribution account

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

B. Smith, Sonjia, , ,

Mailing Address 815 Broomley Rd

City
Charlottesville

State
VA

Zip Code
22901-7821

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self Employed

Occupation (for Individual)
Philanthropist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

05 / 05 / 2026

Transaction ID : 2748547

Amount of Each Receipt this Period

25000.00

☐ Memo Item

Contribution to non-contribution account

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

C. Steisel, Jake, , ,

Mailing Address 355 President St

City
Brooklyn

State
NY

Zip Code
11231-4905

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Global Action on Gun Violence

Occupation (for Individual)
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

05 / 19 / 2026

Transaction ID : 2746781

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Contribution to non-contribution account

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

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

40000.00

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

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

FOR LINE NUMBER: PAGE 103 OF 212
(check only one)

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. The People United PAC

Mailing Address PO Box 33079

City
Washington

State
DC

Zip Code
20033-0079

FEC ID number of contributing
federal political committee.

C C00776419

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30000.00

Date of Receipt

05 / **06** / **2026**

Transaction ID : 2748552

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Contribution to non-contribution account

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

B. Thomas, Elizabeth, , ,

Mailing Address 3510 Multiview Dr

City
Los Angeles

State
CA

Zip Code
90068-1222

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Larger Than Life

Occupation (for Individual)
Self

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

80000.00

Date of Receipt

05 / **05** / **2026**

Transaction ID : 2751459

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Contribution to non-contribution account

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

C. UAW

Mailing Address 8000 E Jefferson Ave

City
Detroit

State
MI

Zip Code
48214-3963

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 ▼

75000.00

Date of Receipt

05 / **19** / **2026**

Transaction ID : 2748576

Amount of Each Receipt this Period

25000.00

☐ Memo Item

Contribution to non-contribution account

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

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

40000.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

A. UAW

Mailing Address 8000 E Jefferson Ave

City
DetroitState
MIZip Code
48214-3963FEC 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 ▼

75000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2026

Transaction ID : 2748577

Amount of Each Receipt this Period

25000.00

☐ Memo Item

Contribution to non-contribution account

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

B. UAW

Mailing Address 8000 E Jefferson Ave

City
DetroitState
MIZip Code
48214-3963FEC 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 ▼

75000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2026

Transaction ID : 2748578

Amount of Each Receipt this Period

25000.00

☐ Memo Item

Contribution to non-contribution account

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

C. Weiss, Marc, , ,

Mailing Address 5309 Annunciation St

City
New OrleansState
LAZip Code
70115-1901FEC 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 ▼

4500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2026

Transaction ID : 2746722

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Contribution to non-contribution account

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

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

52500.00

3955467.63

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

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. ActBlue

Mailing Address 366 Summer St

City
Somerville

State
MA

Zip Code
02144-3132

Purpose of Disbursement

Online contribution processor fee

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 31 / 2026

FEC Identification Number

C

Transaction ID : 500003107

Amount of Each Disbursement this Period

3439.28

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue

Mailing Address 366 Summer St

City
Somerville

State
MA

Zip Code
02144-3132

Purpose of Disbursement

Online contribution processor fees

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 31 / 2026

FEC Identification Number

C

Transaction ID : 500003108

Amount of Each Disbursement this Period

3.43

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ActBlue

Mailing Address 366 Summer St

City
Somerville

State
MA

Zip Code
02144-3132

Purpose of Disbursement

Online contribution processor fees

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 31 / 2026

FEC Identification Number

C

Transaction ID : 500003109

Amount of Each Disbursement this Period

4332.00

☐ Memo Item

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

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

7774.71

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

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. ActBlue

Mailing Address 366 Summer St

City
Somerville

State
MA

Zip Code
02144-3132

Purpose of Disbursement

Online contribution processor fees

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 31 / 2026

FEC Identification Number

C

Transaction ID : 500003110

Amount of Each Disbursement this Period

12.09

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Amalgamated Bank

Mailing Address 275 7th Ave

City
New York

State
NY

Zip Code
10001-6708

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 / D D / Y Y Y Y Y Y
05 / 28 / 2026

FEC Identification Number

C

Transaction ID : 500003111

Amount of Each Disbursement this Period

14.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Amalgamated Bank

Mailing Address 275 7th Ave

City
New York

State
NY

Zip Code
10001-6708

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 / D D / Y Y Y Y Y Y
05 / 28 / 2026

FEC Identification Number

C

Transaction ID : 500003112

Amount of Each Disbursement this Period

151.53

☐ Memo Item

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

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

177.62

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Amalgamated Bank

Mailing Address 275 7th Ave

City
New YorkState
NYZip Code
10001-6708

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	D	/	Y	Y	Y	Y	Y	Y
0	5			2	8			2	0	2	6		

FEC Identification Number

C**Transaction ID : 500003113**

Amount of Each Disbursement this Period

524.21

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Amalgamated Bank

Mailing Address 275 7th Ave

City
New YorkState
NYZip Code
10001-6708

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	D	/	Y	Y	Y	Y	Y	Y
0	5			2	8			2	0	2	6		

FEC Identification Number

C**Transaction ID : 500003114**

Amount of Each Disbursement this Period

123.09

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Amalgamated Bank

Mailing Address 275 7th Ave

City
New YorkState
NYZip Code
10001-6708

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	D	/	Y	Y	Y	Y	Y	Y
0	5			2	8			2	0	2	6		

FEC Identification Number

C**Transaction ID : 500003115**

Amount of Each Disbursement this Period

16.00

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

663.30

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

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

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Amalgamated Bank

Mailing Address 275 7th Ave

City
New York

State
NY

Zip Code
10001-6708

Purpose of Disbursement

Bank Fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 28 / 2026

FEC Identification Number

C

Transaction ID : 500003116

Amount of Each Disbursement this Period

162.46

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Financial Innovations

Mailing Address 1 Weingeroff Blvd

City
Cranston

State
RI

Zip Code
02910-4009

Purpose of Disbursement

Swag & merchandise for online store

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 13 / 2026

FEC Identification Number

C

Transaction ID : 500003118

Amount of Each Disbursement this Period

6277.13

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Shopify

Mailing Address 33 New Montgomery St
Ste 750

City
San Francisco

State
CA

Zip Code
94105-4537

Purpose of Disbursement

Online contribution processor fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 31 / 2026

FEC Identification Number

C

Transaction ID : 500003117

Amount of Each Disbursement this Period

63.65

☐ Memo Item

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

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

6503.24

15118.87

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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(check only one)

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. API PA Votes

Mailing Address PO Box 22611

City
PhiladelphiaState
PAZip Code
19110-2611

Purpose of Disbursement

In-kind contribution of printed literature

Candidate Name

API PA Votes

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	9			2	0	2	6		

FEC Identification Number

C C00761064**Transaction ID : 500003085**

Amount of Each Disbursement this Period

2662.29

☒ Memo Item**B. API PA Votes**

Mailing Address PO Box 22611

City
PhiladelphiaState
PAZip Code
19110-2611

Purpose of Disbursement

In-kind contribution of printed literature

Candidate Name

API PA Votes

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify)		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	9			2	0	2	6		

FEC Identification Number

C C00761064**Transaction ID : 500003086**

Amount of Each Disbursement this Period

872.93

☒ Memo Item**C. Freedom PA**

Mailing Address 1414 Brighton Rd

City
PittsburghState
PAZip Code
15212-4478

Purpose of Disbursement

In-kind contribution of printed literature

Candidate Name

Freedom PA

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	9			2	0	2	6		

FEC Identification Number

C C00902189**Transaction ID : 500003083**

Amount of Each Disbursement this Period

4525.89

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

0.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Make the Road Action Political Committee

Mailing Address 301 Grove St

City
BrooklynState
NYZip Code
11237-5664

Purpose of Disbursement

In-kind contribution of printed literature

Candidate Name

Make the Road Action Political Committee

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	9			2	0	2	6		

FEC Identification Number

C C00689745**Transaction ID : 500003084**

Amount of Each Disbursement this Period

1597.37

☒ Memo Item

Full Name (Last, First, Middle Initial)

B.

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

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)..... ►

0.00

0.00

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

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

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Admire Media LLC

Mailing Address 222 W Ontario St

City
Chicago

State
IL

Zip Code
60654-3652

Purpose of Disbursement

TV ads for non-federal election

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 14 / 2026

FEC Identification Number

C

Transaction ID : 500003120

Amount of Each Disbursement this Period

100000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Admire Media LLC

Mailing Address 222 W Ontario St

City
Chicago

State
IL

Zip Code
60654-3652

Purpose of Disbursement

TV ads for non-federal election

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 15 / 2026

FEC Identification Number

C

Transaction ID : 500003121

Amount of Each Disbursement this Period

50650.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Admire Media LLC

Mailing Address 222 W Ontario St

City
Chicago

State
IL

Zip Code
60654-3652

Purpose of Disbursement

TV ads for non-federal election

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 18 / 2026

FEC Identification Number

C

Transaction ID : 500003122

Amount of Each Disbursement this Period

100000.00

☐ Memo Item

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

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

250650.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Admire Media LLC

Mailing Address 222 W Ontario St

City
ChicagoState
ILZip Code
60654-3652

Purpose of Disbursement

TV ads for non-federal election

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	5			2	8			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500003123**

Amount of Each Disbursement this Period

100000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Artisan Strategies

Mailing Address 1300 Pennsylvania Ave NW

City
WashingtonState
DCZip Code
20229-0002

Purpose of Disbursement

Payment made in error, to be refunded

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	5			1	8			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500003153**

Amount of Each Disbursement this Period

4250.89

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Artisan Strategies

Mailing Address 1300 Pennsylvania Ave NW

City
WashingtonState
DCZip Code
20229-0002

Purpose of Disbursement

Phonebank for non-federal election

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	5			2	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500003150**

Amount of Each Disbursement this Period

20620.00

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

124870.89

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Berlin RosenMailing Address 15 Maiden Ln
Ste 1600City
New YorkState
NYZip Code
10038-5111

Purpose of Disbursement

Direct mail for non-federal election

Candidate Name

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	5			1	4			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500003124**

Amount of Each Disbursement this Period

61440.69

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Berlin RosenMailing Address 15 Maiden Ln
Ste 1600City
New YorkState
NYZip Code
10038-5111

Purpose of Disbursement

Direct mail for non-federal election

Candidate Name

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	5			1	4			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500003125**

Amount of Each Disbursement this Period

63678.51

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Berlin RosenMailing Address 15 Maiden Ln
Ste 1600City
New YorkState
NYZip Code
10038-5111

Purpose of Disbursement

Direct mail for non-federal election

Candidate Name

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	5			1	8			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500003126**

Amount of Each Disbursement this Period

61440.69

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

186559.89

SCHEDULE B (FEC Form 3X)
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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Berlin RosenMailing Address 15 Maiden Ln
Ste 1600City
New YorkState
NYZip Code
10038-5111

Purpose of Disbursement

Direct mail for non-federal election

Candidate Name

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	5			1	9			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500003127**

Amount of Each Disbursement this Period

55632.72

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Berlin RosenMailing Address 15 Maiden Ln
Ste 1600City
New YorkState
NYZip Code
10038-5111

Purpose of Disbursement

Direct mail for non-federal election

Candidate Name

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	5			2	2			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500003128**

Amount of Each Disbursement this Period

66428.91

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Berlin RosenMailing Address 15 Maiden Ln
Ste 1600City
New YorkState
NYZip Code
10038-5111

Purpose of Disbursement

Direct mail for non-federal election

Candidate Name

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	5			2	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500003129**

Amount of Each Disbursement this Period

65926.79

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

187988.42

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Debra Schommer Media GroupMailing Address 10153 Riverside Dr
343City
Toluca LakeState
CAZip Code
91602-2562

Purpose of Disbursement

Payment made in error, to be refunded

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	5			2	7			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500003152**

Amount of Each Disbursement this Period

15000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Free The Ballot! Incarcerated Voter Family Network

Mailing Address 5107 Irving St

City
PhiladelphiaState
PAZip Code
19139-4114

Purpose of Disbursement

Printed literature

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify)		

State:

District:

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : 500003087**

Amount of Each Disbursement this Period

2339.50

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Free The Ballot! Incarcerated Voter Family Network

Mailing Address 5107 Irving St

City
PhiladelphiaState
PAZip Code
19139-4114

Purpose of Disbursement

Printed literature

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : 500003088**

Amount of Each Disbursement this Period

795.20

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

15000.00

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

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. House of Print & Thread LLC

Mailing Address 11890 Old Baltimore Pike

City
Beltsville

State
MD

Zip Code
20705-1263

Purpose of Disbursement

Direct mail for non-federal election

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 27 / 2026

FEC Identification Number

C

Transaction ID : 500003131

Amount of Each Disbursement this Period

12744.06

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. House of Print & Thread LLC

Mailing Address 11890 Old Baltimore Pike

City
Beltsville

State
MD

Zip Code
20705-1263

Purpose of Disbursement

Direct mail for non-federal election

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 27 / 2026

FEC Identification Number

C

Transaction ID : 500003132

Amount of Each Disbursement this Period

12847.94

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Livingston, Theron, , ,

Mailing Address 1216 Dorchester Ave

City
Gwynn Oak

State
MD

Zip Code
21207-4819

Purpose of Disbursement

Event DJ

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 07 / 2026

FEC Identification Number

C

Transaction ID : 500003119

Amount of Each Disbursement this Period

500.00

☐ Memo Item

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

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

26092.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Minuteman Press of Philadelphia

Mailing Address 932 E Hunting Park Ave

City
PhiladelphiaState
PAZip Code
19124-4807

Purpose of Disbursement

Printed literature for non-federal election

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	D	/	Y	Y	Y	Y	Y	Y
0	5			1	8			2	0	2	6		

FEC Identification Number

C**Transaction ID : 500003136**

Amount of Each Disbursement this Period

2837.35

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Minuteman Press of Philadelphia

Mailing Address 932 E Hunting Park Ave

City
PhiladelphiaState
PAZip Code
19124-4807

Purpose of Disbursement

Printed literature for non-federal election

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

FEC Identification Number

C**Transaction ID : 500003137**

Amount of Each Disbursement this Period

900.59

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. On Your Left Political LLCMailing Address 418 Broadway
Ste NCity
AlbanyState
NYZip Code
12207-2922

Purpose of Disbursement

Fundraising consultant

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	D	/	Y	Y	Y	Y	Y	Y
0	5			2	6			2	0	2	6		

FEC Identification Number

C**Transaction ID : 500003130**

Amount of Each Disbursement this Period

27411.20

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

31149.14

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Orellana, Jacelyn, , ,

Mailing Address 3400 Branch Ave

City
AlexandriaState
VAZip Code
22302-1252

Purpose of Disbursement

Fundraising consultant for non-federal election

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	8			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500003081**

Amount of Each Disbursement this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Pegram, Mackey, , ,

Mailing Address 8106 Hunnicut Rd

City
DallasState
TXZip Code
75228-5929

Purpose of Disbursement

Fundraising consultant for non-federal election

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	8			2	0	2	6	

FEC Identification Number

C**Transaction ID : 500003082**

Amount of Each Disbursement this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Pennsylvania Working Families Party

Mailing Address 1541 Ridge Ave

City
PhiladelphiaState
PAZip Code
19130-2368

Purpose of Disbursement

Reimbursement for graphic design for non-federal election

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : 500003135**

Amount of Each Disbursement this Period

400.00

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

6400.00

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

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

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Public Policy Polling

Mailing Address 2912 Highwoods Blvd

City
Raleigh

State
NC

Zip Code
27604-1064

Purpose of Disbursement

Polling for non-federal election

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 13 / 2026

FEC Identification Number

C

Transaction ID : 500003133

Amount of Each Disbursement this Period

11000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Safe and Affordable DC

Mailing Address 880 P St NW
Apt 817

City
Washington

State
DC

Zip Code
20001-3554

Purpose of Disbursement

Contribution to non-federal committee

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 08 / 2026

FEC Identification Number

C

Transaction ID : 500003134

Amount of Each Disbursement this Period

40000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Seed the Vote

Mailing Address 1212 Broadway

City
Oakland

State
CA

Zip Code
94612-1805

Purpose of Disbursement

In Kind Contribution to Non-Contribution account for travel expenses

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 19 / 2026

FEC Identification Number

C

Transaction ID : 500004711

Amount of Each Disbursement this Period

18500.00

☐ Memo Item

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

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

69500.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Working Families Party PAC

Full Name (Last, First, Middle Initial)

A. Working Families For San Francisco PAC

Mailing Address 2350 Kerner Blvd

City
San Rafael

State
CA

Zip Code
94901-5594

Purpose of Disbursement

Phone Canvassing

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 22 / 2026

FEC Identification Number

C

Transaction ID : 500003156

Amount of Each Disbursement this Period

1812.50

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Wozny Consulting

Mailing Address 2811 W McKinley Blvd

City
Milwaukee

State
WI

Zip Code
53208-2928

Purpose of Disbursement

Payment made in error, to be refunded

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 13 / 2026

FEC Identification Number

C

Transaction ID : 500003151

Amount of Each Disbursement this Period

6750.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / 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)..... ►

6750.00

904960.34

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

PAGE 121 OF 212

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

NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

AARON REGUNBERG FOR CONGRESS

Nature of Debt (Purpose):

Personnel - Fee for Service

Mailing Address 50 Duncan Ave

City
ProvidenceState
RIZip Code
02906-1815

Outstanding Balance Beginning This Period

8466.50

Transaction ID : 1250000040

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

8466.50

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

People for Joann Bryn Smith

Nature of Debt (Purpose):

Refund of Contribution

Mailing Address PO Box 4156

City
WyomingState
PAZip Code
18644-0156

Outstanding Balance Beginning This Period

1500.00

Transaction ID : 1250000055

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1500.00

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)..... ►

9966.50

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

9966.50

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) ►

9966.50

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

PAGE 122 OF 212

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

NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

The Original Print Shoppe

Nature of Debt (Purpose):

Direct Mail for Harris 1832340

Mailing Address 270 S Telegraph Rd

City
PontiacState
MIZip Code
48341-1979

Outstanding Balance Beginning This Period

40520.00

Transaction ID : 1250000150

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

40520.00

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

Changing Dynamics

Nature of Debt (Purpose):

Digital mobile billboard design for Robert
Peters. 24-hour report FEC - 1956338

Mailing Address 219 Caliente St

City
RenoState
NVZip Code
89509-2702

Outstanding Balance Beginning This Period

2500.00

Transaction ID : 1250000206

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

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

Image Cube

Nature of Debt (Purpose):

Printing

Mailing Address 15840 Monte St
Ste 109City
SylmarState
CAZip Code
91342-7670

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250000246

Amount Incurred This Period

284.30

Payment This Period

0.00

Outstanding Balance at Close of This Period

284.30

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

43304.30

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 123 OF 212

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

NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

Image Cube

Nature of Debt (Purpose):

Printing

Mailing Address 15840 Monte St
Ste 109City
SylmarState
CAZip Code
91342-7670

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250000247

Amount Incurred This Period

142.15

Payment This Period

0.00

Outstanding Balance at Close of This Period

142.15

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

Image Cube

Nature of Debt (Purpose):

Printing

Mailing Address 15840 Monte St
Ste 109City
SylmarState
CAZip Code
91342-7670

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250000248

Amount Incurred This Period

142.15

Payment This Period

0.00

Outstanding Balance at Close of This Period

142.15

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

Image Cube

Nature of Debt (Purpose):

Printing

Mailing Address 15840 Monte St
Ste 109City
SylmarState
CAZip Code
91342-7670

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250000245

Amount Incurred This Period

516.73

Payment This Period

0.00

Outstanding Balance at Close of This Period

516.73

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

801.03

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)

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

NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

Base Builder

Nature of Debt (Purpose):

Canvassing for Mandela Barnes

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

92181.11

Transaction ID : 1250000045

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

92181.11

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

Base Builder

Nature of Debt (Purpose):

Canvassing for Mandela Barnes

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

207560.00

Transaction ID : 1250000163

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

207560.00

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

Base Builder

Nature of Debt (Purpose):

Phone Bank

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

1658.83

Transaction ID : 1250000164

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1658.83

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

301399.94

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 125 OF 212

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

NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

Base Builder

Nature of Debt (Purpose):

Phone Bank for John Fetterman

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

66280.00

Transaction ID : 1250000165

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

66280.00

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

Base Builder

Nature of Debt (Purpose):

Canvassing for John Fetterman

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

4000.00

Transaction ID : 1250000049

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4000.00

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

Base Builder

Nature of Debt (Purpose):

Canvassing for John Fetterman

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

2000.00

Transaction ID : 1250000166

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

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

72280.00

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 126 OF 212

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

NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

Base Builder

Nature of Debt (Purpose):

Canvassing for John Fetterman

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

124350.00

Transaction ID : 1250000167

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

124350.00

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

Base Builder

Nature of Debt (Purpose):

Phone Bank

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

11000.00

Transaction ID : 1250000042

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

11000.00

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

Base Builder

Nature of Debt (Purpose):

In person canvassing

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

36000.00

Transaction ID : 1250000043

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

36000.00

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

171350.00

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)

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

NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

Base Builder

Nature of Debt (Purpose):

In person canvassing

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

11000.00

Transaction ID : 1250000044

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

11000.00

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

Base Builder

Nature of Debt (Purpose):

In person canvassing for Cori Bush

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

20000.00

Transaction ID : 1250000169

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

20000.00

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

Base Builder

Nature of Debt (Purpose):

Phone calls for Mondaire Jones 24 hour report
1790196

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

4000.00

Transaction ID : 1250000168

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4000.00

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

35000.00

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)

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

NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

Base Builder

Nature of Debt (Purpose):

Phone Canvass for Mai Vang Transaction ID
5000002525 FEC: 1971566

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

65.29

Transaction ID : 1250000216

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

65.29

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

Base Builder

Nature of Debt (Purpose):

Phone Canvass for Randy Villegas
Transaction ID: 5000002526 FEC: 1971566

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

75.04

Transaction ID : 1250000217

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

75.04

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

Base Builder

Nature of Debt (Purpose):

Phone Canvass

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250000273

Amount Incurred This Period

5.66

Payment This Period

0.00

Outstanding Balance at Close of This Period

5.66

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

145.99

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)

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

NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

Base Builder

Nature of Debt (Purpose):

Phone Canvass

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250000274

Amount Incurred This Period

5.66

Payment This Period

0.00

Outstanding Balance at Close of This Period

5.66

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

Base Builder

Nature of Debt (Purpose):

Canvass

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250000270

Amount Incurred This Period

1000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

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

Base Builder

Nature of Debt (Purpose):

Canvass

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250000269

Amount Incurred This Period

13000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

13000.00

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

14005.66

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 130 OF 212

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

NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

Base Builder

Nature of Debt (Purpose):

Phone bank

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250000259

Amount Incurred This Period

503.99

Payment This Period

0.00

Outstanding Balance at Close of This Period

503.99

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

Base Builder

Nature of Debt (Purpose):

Phone canvassing

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250000271

Amount Incurred This Period

1325.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1325.00

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

Base Builder

Nature of Debt (Purpose):

Canvass

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250000268

Amount Incurred This Period

3500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3500.00

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

5328.99

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)

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

NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

Base Builder

Nature of Debt (Purpose):

Canvass (estimate)

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250000233

Amount Incurred This Period

35000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

35000.00

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

Base Builder

Nature of Debt (Purpose):

FEC - 1978256 Canvass (estimate)

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250000236

Amount Incurred This Period

15837.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

15837.50

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

Base Builder

Nature of Debt (Purpose):

Canvass (estimate)

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250000238

Amount Incurred This Period

7973.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7973.00

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

58810.50

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

NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

Base Builder

Nature of Debt (Purpose):

Canvassing 1979274

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250000240

Amount Incurred This Period

4750.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4750.00

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

Base Builder

Nature of Debt (Purpose):

Phone Canvassing

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250000267

Amount Incurred This Period

1825.34

Payment This Period

0.00

Outstanding Balance at Close of This Period

1825.34

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

Base Builder

Nature of Debt (Purpose):

Texting, phonebanks, printed lit distribution

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250000272

Amount Incurred This Period

106.53

Payment This Period

0.00

Outstanding Balance at Close of This Period

106.53

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

6681.87

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)

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

NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

Base Builder

Nature of Debt (Purpose):

Phone banks, texting, & printed literature
distribution

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250000252

Amount Incurred This Period

171.06

Payment This Period

0.00

Outstanding Balance at Close of This Period

171.06

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

Base Builder

Nature of Debt (Purpose):

Texting, phonebanks, printed literature
distribution

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250000255

Amount Incurred This Period

128.44

Payment This Period

0.00

Outstanding Balance at Close of This Period

128.44

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

Base Builder

Nature of Debt (Purpose):

Phonebanking & printed literature distribution

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250000260

Amount Incurred This Period

239.82

Payment This Period

0.00

Outstanding Balance at Close of This Period

239.82

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

539.32

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)

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

NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

Base Builder

Nature of Debt (Purpose):

Texting, phonebanks, printed literature
distribution

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250000261

Amount Incurred This Period

128.44

Payment This Period

0.00

Outstanding Balance at Close of This Period

128.44

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

Base Builder

Nature of Debt (Purpose):

Texting, phonebanks, printed literature
distribution

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250000264

Amount Incurred This Period

334.48

Payment This Period

0.00

Outstanding Balance at Close of This Period

334.48

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

Base Builder

Nature of Debt (Purpose):

Phonebanks, texting, & printed literature
distribution

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250000275

Amount Incurred This Period

54.92

Payment This Period

0.00

Outstanding Balance at Close of This Period

54.92

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

517.84

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 135 OF 212

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

NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

Base Builder

Nature of Debt (Purpose):

Phonebank

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250000276

Amount Incurred This Period

1.70

Payment This Period

0.00

Outstanding Balance at Close of This Period

1.70

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

Berlin Rosen

Nature of Debt (Purpose):

Ads

Mailing Address 15 Maiden Ln
Ste 1600City
New YorkState
NYZip Code
10038-5111

Outstanding Balance Beginning This Period

7500.00

Transaction ID : 1250000056

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7500.00

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

Break Something

Nature of Debt (Purpose):

Digital Ads for Harris #1820447

Mailing Address 1802 Vernon St NW

City
WashingtonState
DCZip Code
20009-1217

Outstanding Balance Beginning This Period

81249.51

Transaction ID : 1250000057

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

81249.51

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

88751.21

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)

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(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

Break Something

Nature of Debt (Purpose):

Graphic Design for Harris 1832340

Mailing Address 1802 Vernon St NW

City
WashingtonState
DCZip Code
20009-1217

Outstanding Balance Beginning This Period

1000.00

Transaction ID : 1250000058

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

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

CCM&Co

Nature of Debt (Purpose):

Printed Literature for Mandela Barnes

Mailing Address 1022 Boulevard
329City
West HartfordState
CTZip Code
06119-1801

Outstanding Balance Beginning This Period

6040.00

Transaction ID : 1250000059

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6040.00

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

Chojnacki, Sonja, , ,

Nature of Debt (Purpose):

Consulting for postcard program Harris
1841890

Mailing Address 3112 N Weil St

City
MilwaukeeState
WIZip Code
53212-2231

Outstanding Balance Beginning This Period

9000.00

Transaction ID : 1250000162

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

9000.00

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

16040.00

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)

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

NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

Colonial Quality Printing

Nature of Debt (Purpose):

Printed Literature for Harris #1818742

Mailing Address 2997 S Howell Ave

City
MilwaukeeState
WIZip Code
53207-2083

Outstanding Balance Beginning This Period

3439.32

Transaction ID : 1250000060

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3439.32

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

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

410.12

Transaction ID : 1250000061

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

410.12

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

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

31015.82

Transaction ID : 1250000062

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

31015.82

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

34865.26

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)

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

NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

14924.00

Transaction ID : 1250000063

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

14924.00

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

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

0.20

Transaction ID : 1250000064

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

0.20

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

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

48174.91

Transaction ID : 1250000065

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

48174.91

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

63099.11

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)

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

NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

20000.00

Transaction ID : 1250000066

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

20000.00

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

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

20000.00

Transaction ID : 1250000067

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

20000.00

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

Community Labor Administrative Services

Nature of Debt (Purpose):

Personnel from Schedule B Line 21(b)

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

3268.65

Transaction ID : 1250000068

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3268.65

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

43268.65

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)

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

NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

Community Labor Administrative Services

Nature of Debt (Purpose):

Personnel from Schedule B Line 21(b)

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

8466.50

Transaction ID : 1250000069

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

8466.50

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

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting for Bowman reported on 4/11/24

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

3995.00

Transaction ID : 1250000070

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3995.00

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

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting for Jayapal reported on 5/14/24 -
WFT20244161220-1

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

974.51

Transaction ID : 1250000074

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

974.51

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

13436.01

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)

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

NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting for Morales reported on 5/14/24 -
WFT20244161238-1

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

974.51

Transaction ID : 1250000075

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

974.51

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

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting for John Mannion 24 hour report
1791925

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

1129.67

Transaction ID : 1250000079

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1129.67

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

Community Labor Administrative Services

Nature of Debt (Purpose):

phone calls for Cori Bush ID 1808103

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

2000.00

Transaction ID : 1250000089

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

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

4104.18

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)

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

NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

Community Labor Administrative Services

Nature of Debt (Purpose):

Phone bank for Altman #1820447

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

4712.10

Transaction ID : 1250000094

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4712.10

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

Community Labor Administrative Services

Nature of Debt (Purpose):

Facebook Ads for Harris #1821473

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

4800.00

Transaction ID : 1250000095

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4800.00

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

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting filed as Scale to Win for Rudy Salas
1833684

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

1000.00

Transaction ID : 1250000097

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

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

10512.10

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)

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

NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting for Harris 183797

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

44000.00

Transaction ID : 1250000098

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

44000.00

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

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting for Colin Allred 1845400

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

500.00

Transaction ID : 1250000100

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

500.00

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

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting for Harris 187927, 1847530, 1845966,
1846647, 1845966, 1845510, 1843702,
1843367

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

171389.40

Transaction ID : 1250000101

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

171389.40

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

215889.40

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)

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☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting for Gabe Vasquez 1844015

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

20000.00

Transaction ID : 1250000103

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

20000.00

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

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting for Colin Allred 1845400

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

2000.00

Transaction ID : 1250000105

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

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

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting for Adam Gray 1846647

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

1000.00

Transaction ID : 1250000106

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

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

23000.00

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)

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(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting for Colin Allred 1846647

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

2000.00

Transaction ID : 1250000107

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

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

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting for Rudy Salas 1846647

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

2600.00

Transaction ID : 1250000108

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2600.00

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

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting for Colin Allred 184730

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

2000.00

Transaction ID : 1250000109

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

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

6600.00

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)

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(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting for Adam Gray 184730

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

1000.00

Transaction ID : 1250000110

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

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

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting for Sherrod Brown 1847927

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

10000.00

Transaction ID : 1250000111

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10000.00

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

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting for Colin Allred 1847927

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

9000.00

Transaction ID : 1250000113

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

9000.00

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

20000.00

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)

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(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

Community Labor Administrative Services

Nature of Debt (Purpose):

Travel, Lodging, Meals, Supplies

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

100746.26

Transaction ID : 1250000114

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

100746.26

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

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting (estimate) for Adelita Grijalva
(File#1897368)

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

5000.00

Transaction ID : 1250000173

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5000.00

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

Community Labor Administrative Services

Nature of Debt (Purpose):

Event insurance (in-kind contribution to
Villegas for Congress)

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

176.00

Transaction ID : 1250000188

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

176.00

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

105922.26

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)

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(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting (Estimate) Nida Allam - FEC-1949279

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

2500.00

Transaction ID : 1250000204

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

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

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting (Estimate) - Robert Peters

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

2500.00

Transaction ID : 1250000207

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

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

Community Labor Administrative Services

Nature of Debt (Purpose):

Personnel from non-contribution account

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

2000.00

Transaction ID : 1250000205

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

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

7000.00

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 149 OF 212

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

NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

Community Labor Administrative Services

Nature of Debt (Purpose):

Canvassing for Brian Poindexter Transaction
ID: 500002509 FEC: 1972671

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

4054.00

Transaction ID : 1250000218

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4054.00

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

Community Labor Administrative Services

Nature of Debt (Purpose):

Canvassing for Randy Villegas Transaction
ID: 500002527 FEC: 1971566

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

13.98

Transaction ID : 1250000219

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

13.98

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

Community Labor Administrative Services

Nature of Debt (Purpose):

Canvassing for Mai Vang Transaction ID:
500002528 FEC: 1971566

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

13.98

Transaction ID : 1250000220

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

13.98

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

4081.96

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)

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250000251

Amount Incurred This Period

1012.55

Payment This Period

0.00

Outstanding Balance at Close of This Period

1012.55

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

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting (Estimate)

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250000239

Amount Incurred This Period

6000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6000.00

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

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting (Estimate)

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250000243

Amount Incurred This Period

2500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

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

9512.55

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)

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☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

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

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250000254

Amount Incurred This Period

137.01

Payment This Period

0.00

Outstanding Balance at Close of This Period

137.01

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

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250000257

Amount Incurred This Period

471.59

Payment This Period

0.00

Outstanding Balance at Close of This Period

471.59

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

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250000266

Amount Incurred This Period

502.80

Payment This Period

0.00

Outstanding Balance at Close of This Period

502.80

1) SUBTOTALS This Period This Page (optional)..... ►

1111.40

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)

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☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting (Estimate)

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250000242

Amount Incurred This Period

3000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Community Labor Administrative Services

Nature of Debt (Purpose):

Phonebank FEC#1980323

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250000235

Amount Incurred This Period

18200.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

18200.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Community Labor Administrative Services

Nature of Debt (Purpose):

Phonebanks

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250000265

Amount Incurred This Period

18.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

18.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

21218.00

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)

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☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting & phonebanking

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250000253

Amount Incurred This Period

995.10

Payment This Period

0.00

Outstanding Balance at Close of This Period

995.10

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Community Labor Administrative Services

Nature of Debt (Purpose):

Phonebanks

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250000256

Amount Incurred This Period

40.69

Payment This Period

0.00

Outstanding Balance at Close of This Period

40.69

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Community Labor Administrative Services

Nature of Debt (Purpose):

Phone banking

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250000258

Amount Incurred This Period

22.55

Payment This Period

0.00

Outstanding Balance at Close of This Period

22.55

1) SUBTOTALS This Period This Page (optional)..... ►

1058.34

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)

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☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting & phonebanking

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250000262

Amount Incurred This Period

56.30

Payment This Period

0.00

Outstanding Balance at Close of This Period

56.30

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Community Labor Administrative Services

Nature of Debt (Purpose):

Texting & phonebanking

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250000263

Amount Incurred This Period

209.30

Payment This Period

0.00

Outstanding Balance at Close of This Period

209.30

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Community Labor Administrative Services

Nature of Debt (Purpose):

Phonebank

Mailing Address 77 Sands St

City
BrooklynState
NYZip Code
11201-1431

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250000278

Amount Incurred This Period

19.71

Payment This Period

0.00

Outstanding Balance at Close of This Period

19.71

1) SUBTOTALS This Period This Page (optional)..... ►

285.31

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)
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numbered line)

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NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Consolidated Press

Nature of Debt (Purpose):

Direct Mail for Harris #1818742

Mailing Address 3900 Greensboro St

City
CharlotteState
NCZip Code
28206-2036

Outstanding Balance Beginning This Period

816.67

Transaction ID : 1250000115

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

816.67

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Facebook

Nature of Debt (Purpose):

Digital Ads for Jessica Cisneros

Mailing Address 1 Hacker Way

City
Menlo ParkState
CAZip Code
94025-1456

Outstanding Balance Beginning This Period

10000.00

Transaction ID : 1250000116

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Facebook

Nature of Debt (Purpose):

Digital Ads for Andy Levin

Mailing Address 1 Hacker Way

City
Menlo ParkState
CAZip Code
94025-1456

Outstanding Balance Beginning This Period

7000.00

Transaction ID : 1250000117

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7000.00

1) SUBTOTALS This Period This Page (optional)..... ►

17816.67

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)
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FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Facebook

Nature of Debt (Purpose):

Digital Ads for Rashida Tlaib

Mailing Address 1 Hacker Way

City
Menlo ParkState
CAZip Code
94025-1456

Outstanding Balance Beginning This Period

3000.00

Transaction ID : 1250000118

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Facebook

Nature of Debt (Purpose):

Digital Ads for Melanie Stansbury

Mailing Address 1 Hacker Way

City
Menlo ParkState
CAZip Code
94025-1456

Outstanding Balance Beginning This Period

1700.00

Transaction ID : 1250000119

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1700.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Facebook

Nature of Debt (Purpose):

Digital Ads for Gabriel Vasquez

Mailing Address 1 Hacker Way

City
Menlo ParkState
CAZip Code
94025-1456

Outstanding Balance Beginning This Period

1700.00

Transaction ID : 1250000120

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1700.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

6400.00

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)

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FOR LINE NUMBER:
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☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Facebook

Nature of Debt (Purpose):

Digital Ads for Teresa Leger Fernandez

Mailing Address 1 Hacker Way

City
Menlo ParkState
CAZip Code
94025-1456

Outstanding Balance Beginning This Period

900.00

Transaction ID : 1250000121

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

900.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Fedex Office Print and Ship Center

Nature of Debt (Purpose):

Printing for Kamala Harris ID 1814317

Mailing Address 5658 Washington Ave

City
Mount PleasantState
WIZip Code
53406-4096

Outstanding Balance Beginning This Period

74.76

Transaction ID : 1250000124

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

74.76

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Fedex Office Print and Ship Center

Nature of Debt (Purpose):

Printing for Kamala Harris ID 1819155

Mailing Address 5658 Washington Ave

City
Mount PleasantState
WIZip Code
53406-4096

Outstanding Balance Beginning This Period

179.55

Transaction ID : 1250000125

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

179.55

1) **SUBTOTALS** This Period This Page (optional)..... ►

1154.31

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)
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NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

FedEx

Nature of Debt (Purpose):

Printing for Harris 1843367

Mailing Address 942 Shady Grove Rd S

City
MemphisState
TNZip Code
38120-4117

Outstanding Balance Beginning This Period

136.55

Transaction ID : 1250000122

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

136.55

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

FedEx

Nature of Debt (Purpose):

Printing for Harris 1845400

Mailing Address 942 Shady Grove Rd S

City
MemphisState
TNZip Code
38120-4117

Outstanding Balance Beginning This Period

448.56

Transaction ID : 1250000123

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

448.56

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

First Impression, Inc

Nature of Debt (Purpose):

Printed Literature for Harris #1818572

Mailing Address 3401 Girard Blvd NE

City
AlbuquerqueState
NMZip Code
87107-1928

Outstanding Balance Beginning This Period

418.50

Transaction ID : 1250000126

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

418.50

1) **SUBTOTALS** This Period This Page (optional)..... ►

1003.61

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
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NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

First Impression, Inc

Nature of Debt (Purpose):

Shirts and bags for Kamala Harris #1818792

Mailing Address 3401 Girard Blvd NE

City

Albuquerque

State

NM

Zip Code

87107-1928

Outstanding Balance Beginning This Period

1252.50

Transaction ID : 1250000127

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1252.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Great Impressions LLC

Nature of Debt (Purpose):

Posters for Harris #1819527

Mailing Address 5330 W Burleigh St

City

Milwaukee

State

WI

Zip Code

53210-1622

Outstanding Balance Beginning This Period

1551.06

Transaction ID : 1250000128

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1551.06

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Minuteman Press of Philadelphia

Nature of Debt (Purpose):

Printing

Mailing Address 932 E Hunting Park Ave

City

Philadelphia

State

PA

Zip Code

19124-4807

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250000250

Amount Incurred This Period

198.80

Payment This Period

0.00

Outstanding Balance at Close of This Period

198.80

1) **SUBTOTALS** This Period This Page (optional)..... ►

3002.36

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
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☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Pelican Print

Nature of Debt (Purpose):

mail

Mailing Address 3930 Flagstone Ct

City
FlorissantState
MOZip Code
63033-4026

Outstanding Balance Beginning This Period

584.43

Transaction ID : 1250000129

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

584.43

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Pelican Print

Nature of Debt (Purpose):

mail

Mailing Address 3930 Flagstone Ct

City
FlorissantState
MOZip Code
63033-4026

Outstanding Balance Beginning This Period

584.43

Transaction ID : 1250000130

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

584.43

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Person2Person Solutions

Nature of Debt (Purpose):

Printed literature for Harris #1814317 reported
as Red HorseMailing Address 55 Washington St
Ste 702City
BrooklynState
NYZip Code
11201-1063

Outstanding Balance Beginning This Period

2153.12

Transaction ID : 1250000131

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2153.12

1) SUBTOTALS This Period This Page (optional)..... ►

3321.98

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
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☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Person2Person Solutions

Nature of Debt (Purpose):

Printed Literature FEC-1961889 Transaction ID: 500002462

Mailing Address 55 Washington St
Ste 702City
BrooklynState
NYZip Code
11201-1063

Outstanding Balance Beginning This Period

2250.00

Transaction ID : 1250000221

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2250.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Person2Person Solutions

Nature of Debt (Purpose):

Bob Brooks Printed Literature Printed Literature FEC-1961889 Transaction ID: 500002463

Mailing Address 55 Washington St
Ste 702City
BrooklynState
NYZip Code
11201-1063

Outstanding Balance Beginning This Period

4500.00

Transaction ID : 1250000222

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Person2Person Solutions

Nature of Debt (Purpose):

Chris Rabb Printed Literature FEC-1961889 Transaction ID: 500002464

Mailing Address 55 Washington St
Ste 702City
BrooklynState
NYZip Code
11201-1063

Outstanding Balance Beginning This Period

9000.00

Transaction ID : 1250000223

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

9000.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

15750.00

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
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NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Person2Person Solutions

Nature of Debt (Purpose):

Summer Lee Printed Literature FEC-1961889
Transaction ID: 500002466Mailing Address 55 Washington St
Ste 702City
BrooklynState
NYZip Code
11201-1063

Outstanding Balance Beginning This Period

5000.00

Transaction ID : 1250000224

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

Person2Person Solutions

Nature of Debt (Purpose):

Chris Rabb Printed Literature FEC -1968269
Transaction ID: 500002465Mailing Address 55 Washington St
Ste 702City
BrooklynState
NYZip Code
11201-1063

Outstanding Balance Beginning This Period

16500.00

Transaction ID : 1250000225

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

16500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Person2Person Solutions

Nature of Debt (Purpose):

Chris Rabb Printed Literature FEC -1968269
Transaction ID: 500002467Mailing Address 55 Washington St
Ste 702City
BrooklynState
NYZip Code
11201-1063

Outstanding Balance Beginning This Period

4000.00

Transaction ID : 1250000226

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4000.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

25500.00

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 163 OF 212

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Person2Person Solutions

Nature of Debt (Purpose):

Printed literature FEC# 1973936

Mailing Address 55 Washington St
Ste 702City
BrooklynState
NYZip Code
11201-1063

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250000237

Amount Incurred This Period

9318.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

9318.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Person2Person Solutions

Nature of Debt (Purpose):

Direct Mail FEC-1979274

Mailing Address 55 Washington St
Ste 702City
BrooklynState
NYZip Code
11201-1063

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250000234

Amount Incurred This Period

32824.60

Payment This Period

0.00

Outstanding Balance at Close of This Period

32824.60

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Person2Person Solutions

Nature of Debt (Purpose):

Direct Mail FEC-1979274

Mailing Address 55 Washington St
Ste 702City
BrooklynState
NYZip Code
11201-1063

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250000249

Amount Incurred This Period

4639.80

Payment This Period

0.00

Outstanding Balance at Close of This Period

4639.80

1) **SUBTOTALS** This Period This Page (optional)..... ►

46782.40

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)

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FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Person2Person Solutions

Nature of Debt (Purpose):

Printing Amended: ACCEPTED FEC-
1976211 FEC - 1975696Mailing Address 55 Washington St
Ste 702City
BrooklynState
NYZip Code
11201-1063

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250000241

Amount Incurred This Period

4000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Person2Person Solutions

Nature of Debt (Purpose):

Printing FEC-1976211

Mailing Address 55 Washington St
Ste 702City
BrooklynState
NYZip Code
11201-1063

Outstanding Balance Beginning This Period

0.00

Transaction ID : 1250000244

Amount Incurred This Period

2000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Reach Technologies

Nature of Debt (Purpose):

Direct Mail #1820107

Mailing Address 8810 35th Ave

City
Jackson HeightsState
NYZip Code
11372-5759

Outstanding Balance Beginning This Period

15000.00

Transaction ID : 1250000132

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

15000.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

21000.00

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)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Red Horse Strategies

Nature of Debt (Purpose):

Mai Vang Printed Literature FEC -1971566
Transaction ID: 500002510

Mailing Address 55 Washington St

City
BrooklynState
NYZip Code
11201-1036

Outstanding Balance Beginning This Period

34738.88

Transaction ID : 1250000227

Amount Incurred This Period

0.00

Payment This Period

34738.88

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Richstock Productions

Nature of Debt (Purpose):

Digital Ads for Harris #1823264

Mailing Address 1220 11th Ave

City
NeptuneState
NJZip Code
07753-5116

Outstanding Balance Beginning This Period

60.00

Transaction ID : 1250000133

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

60.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Robocall.org

Nature of Debt (Purpose):

Robocall for Jessica Cisneros

Mailing Address 4601 Fairfax Dr

City
ArlingtonState
VAZip Code
22203-1527

Outstanding Balance Beginning This Period

41.27

Transaction ID : 1250000134

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

41.27

1) **SUBTOTALS** This Period This Page (optional)..... ►

101.27

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 166 OF 212

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Scale to Win

Nature of Debt (Purpose):

Texting

Mailing Address 13742 Harper St

City

Santa Ana

State

CA

Zip Code

92703-1419

Outstanding Balance Beginning This Period

1200.00

Transaction ID : 1250000135

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1200.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Scale to Win

Nature of Debt (Purpose):

Phone calls for Harris #1821473

Mailing Address 13742 Harper St

City

Santa Ana

State

CA

Zip Code

92703-1419

Outstanding Balance Beginning This Period

38224.86

Transaction ID : 1250000136

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

38224.86

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Scale to Win

Nature of Debt (Purpose):

Texting for Harris #1821473

Mailing Address 13742 Harper St

City

Santa Ana

State

CA

Zip Code

92703-1419

Outstanding Balance Beginning This Period

1500.00

Transaction ID : 1250000137

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1500.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

40924.86

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 167 OF 212

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Scale to Win

Nature of Debt (Purpose):

Texting for Harris #1823642

Mailing Address 13742 Harper St

City

Santa Ana

State

CA

Zip Code

92703-1419

Outstanding Balance Beginning This Period

4400.00

Transaction ID : 1250000138

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4400.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Scale to Win

Nature of Debt (Purpose):

Texting for Salas 1823978

Mailing Address 13742 Harper St

City

Santa Ana

State

CA

Zip Code

92703-1419

Outstanding Balance Beginning This Period

500.00

Transaction ID : 1250000139

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Scale to Win

Nature of Debt (Purpose):

Texting for Harris #1823978

Mailing Address 13742 Harper St

City

Santa Ana

State

CA

Zip Code

92703-1419

Outstanding Balance Beginning This Period

1000.00

Transaction ID : 1250000140

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

5900.00

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 168 OF 212

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Scale to Win

Nature of Debt (Purpose):

Texting for Harris #1829064

Mailing Address 13742 Harper St

City

Santa Ana

State

CA

Zip Code

92703-1419

Outstanding Balance Beginning This Period

5000.00

Transaction ID : 1250000141

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

Scale to Win

Nature of Debt (Purpose):

Texting for Harris #1830948

Mailing Address 13742 Harper St

City

Santa Ana

State

CA

Zip Code

92703-1419

Outstanding Balance Beginning This Period

2000.00

Transaction ID : 1250000142

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Scale to Win

Nature of Debt (Purpose):

Phone Bank for Harris #1830268

Mailing Address 13742 Harper St

City

Santa Ana

State

CA

Zip Code

92703-1419

Outstanding Balance Beginning This Period

201.59

Transaction ID : 1250000143

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

201.59

1) **SUBTOTALS** This Period This Page (optional)..... ►

7201.59

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)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Scale to Win

Nature of Debt (Purpose):

Texting for Harris 1832340, 1833684, 183656,
1834846, 1836056, 1834846

Mailing Address 13742 Harper St

City

Santa Ana

State

CA

Zip Code

92703-1419

Outstanding Balance Beginning This Period

30157.70

Transaction ID : 1250000144

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

30157.70

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Seed the Vote

Nature of Debt (Purpose):

Warnock

Mailing Address 1212 Broadway

City

Oakland

State

CA

Zip Code

94612-1805

Outstanding Balance Beginning This Period

3000.00

Transaction ID : 1250000145

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Shirts.co

Nature of Debt (Purpose):

Shirts and totebags for Harris 1818792

Mailing Address 4524 S Saint Peters Pkwy

City

Saint Peters

State

MO

Zip Code

63304-7342

Outstanding Balance Beginning This Period

1583.40

Transaction ID : 1250000146

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1583.40

1) **SUBTOTALS** This Period This Page (optional)..... ►

34741.10

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 170 OF 212

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Skyridge Strategies

Nature of Debt (Purpose):

Digital Ads for Harris #1822108

Mailing Address 2791 Oak Aly

City
EugeneState
ORZip Code
97405-3692

Outstanding Balance Beginning This Period

5500.00

Transaction ID : 1250000147

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Skyridge Strategies

Nature of Debt (Purpose):

Digital ads for Harris 1847927

Mailing Address 2791 Oak Aly

City
EugeneState
ORZip Code
97405-3692

Outstanding Balance Beginning This Period

10000.00

Transaction ID : 1250000148

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

The Baseline Agency

Nature of Debt (Purpose):

Mail for Jessica Cisneros

Mailing Address 1835 7th St NW

City
WashingtonState
DCZip Code
20001-3107

Outstanding Balance Beginning This Period

39963.76

Transaction ID : 1250000149

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

39963.76

1) **SUBTOTALS** This Period This Page (optional)..... ►

55463.76

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)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Turn it Blue

Nature of Debt (Purpose):

digital ads

Mailing Address 780 Utica Ave

City
BoulderState
COZip Code
80304-0755

Outstanding Balance Beginning This Period

10000.00

Transaction ID : 1250000151

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Turn it Blue

Nature of Debt (Purpose):

Digital Ads opposing Maxine Dexter ID
WFT20244201520-1

Mailing Address 780 Utica Ave

City
BoulderState
COZip Code
80304-0755

Outstanding Balance Beginning This Period

1500.00

Transaction ID : 1250000152

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Union Print Shop

Nature of Debt (Purpose):

Printed Literature for Harris 1819527

Mailing Address 49 S Sycamore

City
MesaState
AZZip Code
85202-1151

Outstanding Balance Beginning This Period

1200.00

Transaction ID : 1250000153

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1200.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

12700.00

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 172 OF 212

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Union Print Shop

Nature of Debt (Purpose):

Printed Literature for Harris 1845400

Mailing Address 49 S Sycamore

City
MesaState
AZZip Code
85202-1151

Outstanding Balance Beginning This Period

17500.00

Transaction ID : 1250000154

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

17500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Weber Printing

Nature of Debt (Purpose):

printing

Mailing Address 3048 N 34th St

City
MilwaukeeState
WIZip Code
53210-1919

Outstanding Balance Beginning This Period

240.00

Transaction ID : 1250000155

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

240.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

With The Ranks

Nature of Debt (Purpose):

Texting for Harris 1814959

Mailing Address 206 N Ferguson Ave

City
CookevilleState
TNZip Code
38501-2865

Outstanding Balance Beginning This Period

44797.61

Transaction ID : 1250000157

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

44797.61

1) **SUBTOTALS** This Period This Page (optional)..... ►

62537.61

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)

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FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

With The Ranks

Nature of Debt (Purpose):

Texting for Harris 1814959

Mailing Address 206 N Ferguson Ave

City
CookevilleState
TNZip Code
38501-2865

Outstanding Balance Beginning This Period

2963.41

Transaction ID : 1250000158

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2963.41

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

With The Ranks

Nature of Debt (Purpose):

Texting for Harris 1815420

Mailing Address 206 N Ferguson Ave

City
CookevilleState
TNZip Code
38501-2865

Outstanding Balance Beginning This Period

20228.07

Transaction ID : 1250000159

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

20228.07

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

With The Ranks

Nature of Debt (Purpose):

Texting for Harris 1815420

Mailing Address 206 N Ferguson Ave

City
CookevilleState
TNZip Code
38501-2865

Outstanding Balance Beginning This Period

22058.14

Transaction ID : 1250000160

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

22058.14

1) SUBTOTALS This Period This Page (optional)..... ►

45249.62

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 174 OF 212

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Working Families Party PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

With The Ranks

Nature of Debt (Purpose):

Texting for Harris 1834846

Mailing Address 206 N Ferguson Ave

City
CookevilleState
TNZip Code
38501-2865

Outstanding Balance Beginning This Period

126000.00

Transaction ID : 1250000161

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

126000.00

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)..... ►

126000.00

2) TOTALS This Period (last page this line number only)..... ►

1932472.32

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) ►

1932472.32

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 175 OF 212
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Working Families Party PAC		FEC IDENTIFICATION NUMBER ▼ CC00606962	
Check if ☐ 24-hour report ☐ 48-hour report		New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Artisan Strategies ☐ Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 05 / 2026	
Mailing Address 1300 Pennsylvania Ave NW		Amount 7726.47	
City Washington	State DC	Zip Code 20229-0002	Transaction ID : 500002536 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 04 / 2026
Purpose of Expenditure Direct Mail (In-kind from CA WFP, Contribution ID 2748769) FEC - 1979358		Category/ Type 	
Name of Federal Candidate: Villegas, Randy, , ,		Office Sought: ☒ Support ☐ Oppose ☐ President ☐ Senate District: <u>22</u> State: <u>CA</u>	
Calendar Year-To-Date Per Election for Office Sought 653478.90		Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶ _____	
Full Name of Payee Artisan Strategies ☐ Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 05 / 2026	
Mailing Address 1300 Pennsylvania Ave NW		Amount 5691.03	
City Washington	State DC	Zip Code 20229-0002	Transaction ID : 500002537 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 04 / 2026
Purpose of Expenditure Direct Mail (In-kind from CA WFP, Contribution ID 2748769) FEC-1979358		Category/ Type 	
Name of Federal Candidate: Vang, Mai, , ,		Office Sought: ☒ Support ☐ Oppose ☐ President ☐ Senate District: <u>07</u> State: <u>CA</u>	
Calendar Year-To-Date Per Election for Office Sought 172113.63		Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures		13417.50	
(b) SUBTOTAL of Unitemized Independent Expenditures.....		 	
(c) TOTAL Independent Expenditures		 	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <u>Boland, Mike, , ,</u>		Date M M / D D / Y Y Y Y Y Y 06 / 20 / 2026	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 176 OF 212
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Working Families Party PAC			FEC IDENTIFICATION NUMBER ▼ C C00606962	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on MM / DD / YYYY				
Full Name of Payee Artisan Strategies ☐ Memo Item			Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 05 / 2026	
Mailing Address 1300 Pennsylvania Ave NW			Amount 3350.13	
City Washington	State DC	Zip Code 20229-0002	Transaction ID : 500002538 Date of Disbursement or Obligation MM / DD / YYYY 05 / 04 / 2026	
Purpose of Expenditure Direct Mail (In-kind from CA WFP, Contribution ID 2748769) FEC - 1979358		Category/ Type		
Name of Federal Candidate: Gonzales-Torres, Angela, , ,			☒ Support ☐ Oppose Office Sought: ☒ House ☐ Senate District: 34 ☐ President State: CA	
Calendar Year-To-Date Per Election for Office Sought 5742.78			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
Full Name of Payee Artisan Strategies ☐ Memo Item			Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 12 / 2026	
Mailing Address 1300 Pennsylvania Ave NW			Amount 4250.89	
City Washington	State DC	Zip Code 20229-0002	Transaction ID : 500002596 Date of Disbursement or Obligation MM / DD / YYYY 05 / 12 / 2026	
Purpose of Expenditure Direct Mail		Category/ Type		
Name of Federal Candidate: Vang, Mai, , ,			☒ Support ☐ Oppose Office Sought: ☒ House ☐ Senate District: 07 ☐ President State: CA	
Calendar Year-To-Date Per Election for Office Sought 172113.63			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures 7601.02 (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Boland, Mike, , ,</u>			Date MM / DD / YYYY 06 / 20 / 2026	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 177 OF 212
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Working Families Party PAC			FEC IDENTIFICATION NUMBER ▼ C C00606962	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y				
Full Name of Payee Artisan Strategies			☐ Memo Item Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 22 / 2026	
Mailing Address 1300 Pennsylvania Ave NW			Amount 3384.78	
City Washington	State DC	Zip Code 20229-0002	Transaction ID : 500003068 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 22 / 2026	
Purpose of Expenditure Direct Mail		Category/ Type		
Name of Federal Candidate: Chan, Connie, , ,			☒ Support Office Sought: ☒ House District: <u>11</u> ☐ Oppose ☐ President ☐ Senate State: <u>CA</u>	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☒ Primary ☐ General 6270.63 ☐ Other (specify) ▶	
Full Name of Payee Base Builder			☒ Memo Item Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 04 / 2026	
Mailing Address 77 Sands St			Amount 5.66	
City Brooklyn	State NY	Zip Code 11201-1431	Transaction ID : 500002534 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 04 / 2026	
Purpose of Expenditure Phone Canvass (originally reported \$116.63 estimate)		Category/ Type		
Name of Federal Candidate: Vang, Mai, , ,			☒ Support Office Sought: ☒ House District: <u>07</u> ☐ Oppose ☐ President ☐ Senate State: <u>CA</u>	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☒ Primary ☐ General 172113.63 ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures			3384.78	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Boland, Mike, , ,</u>			Date M M / D D / Y Y Y Y Y Y 06 / 20 / 2026	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Working Families Party PAC	FEC IDENTIFICATION NUMBER ▼ C C00606962
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y	

Full Name of Payee Base Builder *	☒ Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y
Mailing Address 77 Sands St		Amount 5.66 Transaction ID : 500002535 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y
City Brooklyn	State NY	
Zip Code 11201-1431		
Purpose of Expenditure Phone Canvass (originally reported \$116.63 estimate)		Category/ Type
Name of Federal Candidate: Villegas, Randy, , ,		☒ Support ☐ Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶
653478.90		Office Sought: ☒ House District: 22 ☐ President ☐ Senate State: CA

Full Name of Payee Base Builder *	☒ Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y
Mailing Address 77 Sands St		Amount 1000.00 Transaction ID : 500002602 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y
City Brooklyn	State NY	
Zip Code 11201-1431		
Purpose of Expenditure Canvassing		Category/ Type
Name of Federal Candidate: Rabb, Christopher, , ,		☒ Support ☐ Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶
517937.37		Office Sought: ☒ House District: 03 ☐ President ☐ Senate State: PA

(a) SUBTOTAL of Itemized Independent Expenditures	▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Boland, Mike, , ,
 Signature

Date

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) Working Families Party PAC	FEC IDENTIFICATION NUMBER ▼ C C00606962
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee ☒ Memo Item Base Builder *	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y
Mailing Address 77 Sands St	Amount 13000.00
City State Zip Code Brooklyn NY 11201-1431	Transaction ID : 500002600 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y
Purpose of Expenditure Canvassing	Category/ Type
Name of Federal Candidate: Rabb, Christopher, , ,	☒ Support ☐ Oppose Office Sought: ☒ House District: 03 ☐ President ☐ Senate State: PA
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶

517937.37

Full Name of Payee ☒ Memo Item Base Builder *	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y
Mailing Address 77 Sands St	Amount 4750.00
City State Zip Code Brooklyn NY 11201-1431	Transaction ID : 500002603 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y
Purpose of Expenditure Canvassing FEC - 1978256	Category/ Type
Name of Federal Candidate: Brooks, Bob, , ,	☒ Support ☐ Oppose Office Sought: ☒ House District: 07 ☐ President ☐ Senate State: PA
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶

37030.70

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Boland, Mike, , ,
 Signature

Date

M M M /

D D D /

Y Y Y Y Y Y

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: SE

Transaction ID : 500002603

\$1,650 between 4/18/26 and 5/4/26 \$125 between 5/5/36 and 5/13/26 Remainder projected spending

Form/Schedule:

Transaction ID:

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) Working Families Party PAC	FEC IDENTIFICATION NUMBER ▼ C C00606962
Check if ☐ 24-hour report ☐ 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee ☒ Memo Item Base Builder *	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 15 / 2026						
Mailing Address 77 Sands St	Amount 503.99 Transaction ID : 500002606 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 15 / 2026						
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; border-bottom: 1px solid black;">City</td> <td style="width: 33%; border-bottom: 1px solid black;">State</td> <td style="width: 33%; border-bottom: 1px solid black;">Zip Code</td> </tr> <tr> <td style="border-bottom: 1px solid black;">Brooklyn</td> <td style="border-bottom: 1px solid black;">NY</td> <td style="border-bottom: 1px solid black;">11201-1431</td> </tr> </table>		City	State	Zip Code	Brooklyn	NY	11201-1431
City		State	Zip Code				
Brooklyn	NY	11201-1431					
Purpose of Expenditure Phone Bank							
Name of Federal Candidate: Gonzales-Torres, Angela, , ,	☒ Support ☐ Oppose						
Office Sought: ☒ House District: <u>34</u> ☐ President ☐ Senate State: <u>CA</u>							
Calendar Year-To-Date Per Election for Office Sought	5742.78						
Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶							

Full Name of Payee ☒ Memo Item Base Builder *	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 16 / 2026						
Mailing Address 77 Sands St	Amount 1325.00 Transaction ID : 500002619 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 16 / 2026						
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; border-bottom: 1px solid black;">City</td> <td style="width: 33%; border-bottom: 1px solid black;">State</td> <td style="width: 33%; border-bottom: 1px solid black;">Zip Code</td> </tr> <tr> <td style="border-bottom: 1px solid black;">Brooklyn</td> <td style="border-bottom: 1px solid black;">NY</td> <td style="border-bottom: 1px solid black;">11201-1431</td> </tr> </table>		City	State	Zip Code	Brooklyn	NY	11201-1431
City		State	Zip Code				
Brooklyn	NY	11201-1431					
Purpose of Expenditure Phone canvassing							
Name of Federal Candidate: Rabb, Christopher, , ,	☒ Support ☐ Oppose						
Office Sought: ☒ House District: <u>03</u> ☐ President ☐ Senate State: <u>PA</u>							
Calendar Year-To-Date Per Election for Office Sought	517937.37						
Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶							

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Boland, Mike, , ,
 Signature

Date
M M / D D / Y Y Y Y Y Y
06 / 20 / 2026

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Working Families Party PAC				FEC IDENTIFICATION NUMBER ▼ C C00606962	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee Base Builder * Mailing Address 77 Sands St City Brooklyn State NY Zip Code 11201-1431 Purpose of Expenditure Canvass			☒ Memo Item Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 18 / 2026 Amount 3500.00 Transaction ID : 500002625 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 18 / 2026		
Name of Federal Candidate: Lee, Summer, , ,			☒ Support ☐ Oppose Office Sought: ☒ House ☐ President ☐ Senate District: 12 State: PA		
Calendar Year-To-Date Per Election for Office Sought			17298.13 Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶		
Full Name of Payee Base Builder * Mailing Address 77 Sands St City Brooklyn State NY Zip Code 11201-1431 Purpose of Expenditure Canvass (estimate)			☒ Memo Item Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 19 / 2026 Amount 7973.00 Transaction ID : 500003060 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 19 / 2026		
Name of Federal Candidate: Lee, Summer, , ,			☒ Support ☐ Oppose Office Sought: ☒ House ☐ President ☐ Senate District: 12 State: PA		
Calendar Year-To-Date Per Election for Office Sought			17298.13 Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures				0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Boland, Mike, , ,</u>				Date M M / D D / Y Y Y Y Y Y 06 / 20 / 2026	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 183 OF 212
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Working Families Party PAC			FEC IDENTIFICATION NUMBER ▼ C C00606962	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y				
Full Name of Payee Base Builder * Mailing Address 77 Sands St City Brooklyn State NY Zip Code 11201-1431 Purpose of Expenditure Canvass (estimate) FEC - 1979274 Category/Type			☒ Memo Item Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y Amount 15837.50 Transaction ID : 500003061 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y	
Name of Federal Candidate: Brooks, Bob, , , Calendar Year-To-Date Per Election for Office Sought 37030.70			☒ Support ☐ Oppose Office Sought: ☒ House ☐ President ☐ Senate District: 07 State: PA Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶	
Full Name of Payee Base Builder * Mailing Address 77 Sands St City Brooklyn State NY Zip Code 11201-1431 Purpose of Expenditure Canvass (estimate) Category/Type			☒ Memo Item Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y Amount 35000.00 Transaction ID : 500003062 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y	
Name of Federal Candidate: Rabb, Christopher, , , Calendar Year-To-Date Per Election for Office Sought 517937.37			☒ Support ☐ Oppose Office Sought: ☒ House ☐ President ☐ Senate District: 03 State: PA Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures 0.00 (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Signature <u>Boland, Mike, , ,</u> Date M M / D D / Y Y Y Y Y Y				

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Working Families Party PAC	FEC IDENTIFICATION NUMBER ▼ C C00606962
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M M / D D / Y Y Y Y Y	

Full Name of Payee Base Builder *	☒ Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y
Mailing Address 77 Sands St		Amount 1825.34 Transaction ID : 500003069 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y
City Brooklyn	State NY	
Zip Code 11201-1431		
Purpose of Expenditure Phone Canvassing (\$1,812.50 in-kind to Working Families For San Francisco PAC)		Category/ Type
Name of Federal Candidate: Chan, Connie, , ,		☒ Support ☐ Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶

Full Name of Payee Base Builder *	☒ Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y
Mailing Address 77 Sands St		Amount 106.53 Transaction ID : 500003080 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y
City Brooklyn	State NY	
Zip Code 11201-1431		
Purpose of Expenditure Texting, phonebanks, printed lit distribution		Category/ Type
Name of Federal Candidate: Villegas, Randy, , ,		☒ Support ☐ Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Boland, Mike, , ,
 Signature

Date

M M /

D D /

Y Y Y Y Y

 06 / 20 / 2026

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 185 OF 212
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Working Families Party PAC			FEC IDENTIFICATION NUMBER ▼ C C00606962	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y				
Full Name of Payee Base Builder * Mailing Address 77 Sands St City Brooklyn State NY Zip Code 11201-1431			☒ Memo Item Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 31 / 2026 Amount 171.06 Transaction ID : 500003157 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 31 / 2026	
Purpose of Expenditure Phone, texts, & printing Not reported in the 24H report - estimates were less than \$1k for expenses Category/Type			Name of Federal Candidate: Wahab, Aisha, , , ☒ Support ☐ Oppose Office Sought: ☒ House ☐ President ☐ Senate District: 14 State: CA	
Calendar Year-To-Date Per Election for Office Sought 1166.16			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
Full Name of Payee Base Builder * Mailing Address 77 Sands St City Brooklyn State NY Zip Code 11201-1431			☒ Memo Item Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 31 / 2026 Amount 128.44 Transaction ID : 500003159 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 31 / 2026	
Purpose of Expenditure Texting, phonebanks, printed literature distribution Category/Type			Name of Federal Candidate: Simon, Lateefah, , , ☒ Support ☐ Oppose Office Sought: ☒ House ☐ President ☐ Senate District: 12 State: CA	
Calendar Year-To-Date Per Election for Office Sought 169.13			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures			0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature Boland, Mike, , ,			Date M M / D D / Y Y Y Y Y Y 06 / 20 / 2026	

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ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Working Families Party PAC				FEC IDENTIFICATION NUMBER ▼ C C00606962	
Check if ☐ 24-hour report ☐ 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Base Builder *			☒ Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 31 / 2026
Mailing Address 77 Sands St					Amount 239.82
City Brooklyn		State NY	Zip Code 11201-1431		Transaction ID : 500003162
Purpose of Expenditure Phonebanking & printed literature distribution			Category/ Type 		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 31 / 2026
Name of Federal Candidate: Gonzales-Torres, Angela, , ,			☒ Support ☐ Oppose		Office Sought: ☒ House District: 34 ☐ President ☐ Senate State: CA
Calendar Year-To-Date Per Election for Office Sought 5742.78			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶		
Full Name of Payee Base Builder *			☒ Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 31 / 2026
Mailing Address 77 Sands St					Amount 128.44
City Brooklyn		State NY	Zip Code 11201-1431		Transaction ID : 500003163
Purpose of Expenditure Texting, phone banks, & printed literature distribution			Category/ Type 		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 31 / 2026
Name of Federal Candidate: Khanna, Rohit, , ,			☒ Support ☐ Oppose		Office Sought: ☒ House District: 17 ☐ President ☐ Senate State: CA
Calendar Year-To-Date Per Election for Office Sought 184.74			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures					0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Boland, Mike, , ,</u>				Date M M / D D / Y Y Y Y Y Y 06 / 20 / 2026	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 187 OF 212
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Working Families Party PAC			FEC IDENTIFICATION NUMBER ▼ C C00606962	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M M / D D D / Y Y Y Y Y Y				
Full Name of Payee Base Builder * Mailing Address 77 Sands St City Brooklyn State NY Zip Code 11201-1431 Purpose of Expenditure Texting, phonebanking, & printed literature distribution Category/Type			☒ Memo Item Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y Amount 334.48 Transaction ID : 500003166 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y	
Name of Federal Candidate: Chan, Connie, , , Calendar Year-To-Date Per Election for Office Sought 6270.63			☒ Support ☐ Oppose Office Sought: ☒ House ☐ Senate District: 11 State: CA Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
Full Name of Payee Base Builder * Mailing Address 77 Sands St City Brooklyn State NY Zip Code 11201-1431 Purpose of Expenditure Phonebanks, texting, & printed literature distribution Category/Type			☒ Memo Item Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y Amount 54.92 Transaction ID : 500003168 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y	
Name of Federal Candidate: Villegas, Randy, , , Calendar Year-To-Date Per Election for Office Sought 653478.90			☒ Support ☐ Oppose Office Sought: ☒ House ☐ Senate District: 22 State: CA Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures			0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Boland, Mike, , ,</u>			Date M M M / D D D / Y Y Y Y Y Y	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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NAME OF COMMITTEE (In Full) Working Families Party PAC			FEC IDENTIFICATION NUMBER ▼ C C00606962		
Check if ☐ 24-hour report ☐ 48-hour report			New report Amends report filed on M M / D D / Y Y Y Y Y Y		

Full Name of Payee Community Labor Administrative Services *			☒ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 04 / 2026		
Mailing Address 77 Sands St			Amount 1012.55			Transaction ID : 500002541 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 04 / 2026		
City Brooklyn	State NY	Zip Code 11201-1431						
Purpose of Expenditure Texting (originally reported as \$1,005.71 estimate)			Category/ Type 					
Name of Federal Candidate: Gonzales-Torres, Angela, , ,			☒ Support ☐ Oppose			Office Sought: ☒ House District: 34 ☐ President ☐ Senate State: CA		
Calendar Year-To-Date Per Election for Office Sought 5742.78			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶					

Full Name of Payee Community Labor Administrative Services *			☒ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 06 / 2026		
Mailing Address 77 Sands St			Amount 6000.00			Transaction ID : 500002581 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 06 / 2026		
City Brooklyn	State NY	Zip Code 11201-1431						
Purpose of Expenditure Texting (Estimate)			Category/ Type 					
Name of Federal Candidate: Vang, Mai, , ,			☒ Support ☐ Oppose			Office Sought: ☒ House District: 07 ☐ President ☐ Senate State: CA		
Calendar Year-To-Date Per Election for Office Sought 172113.63			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶					

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Boland, Mike, , ,
 Signature

Date M M / D D / Y Y Y Y Y Y
 06 / 20 / 2026

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 189 OF 212
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Working Families Party PAC			FEC IDENTIFICATION NUMBER ▼ C C00606962	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M M / D D D / Y Y Y Y Y Y				
Full Name of Payee Community Labor Administrative Services * Mailing Address 77 Sands St City Brooklyn State NY Zip Code 11201-1431 Purpose of Expenditure Texting (Estimate) Category/Type			☒ Memo Item Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y Amount 2500.00 Transaction ID : 500002593 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y	
Name of Federal Candidate: Villegas, Randy, , , Calendar Year-To-Date Per Election for Office Sought 653478.90			☒ Support ☐ Oppose Office Sought: ☒ House ☐ Senate District: 22 State: CA ☐ President ☐ Other (specify) ▶ Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶	
Full Name of Payee Community Labor Administrative Services * Mailing Address 77 Sands St City Brooklyn State NY Zip Code 11201-1431 Purpose of Expenditure Texting Category/Type			☒ Memo Item Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y Amount 471.59 Transaction ID : 500002608 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y	
Name of Federal Candidate: Gonzales-Torres, Angela, , , Calendar Year-To-Date Per Election for Office Sought 5742.78			☒ Support ☐ Oppose Office Sought: ☒ House ☐ Senate District: 34 State: CA ☐ President ☐ Other (specify) ▶ Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures 0.00 (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Signature <u>Boland, Mike, , ,</u> Date M M M / D D D / Y Y Y Y Y Y				

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Working Families Party PAC	FEC IDENTIFICATION NUMBER ▼ C C00606962
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y	

Full Name of Payee ☒ Memo Item Community Labor Administrative Services *			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y	
Mailing Address 77 Sands St			Amount 137.01	
City Brooklyn	State NY	Zip Code 11201-1431	Transaction ID : 500002611 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y	
Purpose of Expenditure Texting		Category/ Type	Name of Federal Candidate: ☒ Support ☐ Oppose Brooks, Bob, , ,	
Calendar Year-To-Date Per Election for Office Sought 37030.70			Office Sought: ☒ House District: 07 ☐ President ☐ Senate State: PA Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	

Full Name of Payee ☒ Memo Item Community Labor Administrative Services *			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y	
Mailing Address 77 Sands St			Amount 502.80	
City Brooklyn	State NY	Zip Code 11201-1431	Transaction ID : 500002613 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y M M / D D / Y Y Y Y Y Y	
Purpose of Expenditure Texting		Category/ Type	Name of Federal Candidate: ☒ Support ☐ Oppose Villegas, Randy, , ,	
Calendar Year-To-Date Per Election for Office Sought 653478.90			Office Sought: ☒ House District: 22 ☐ President ☐ Senate State: CA Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Boland, Mike, , ,
 Signature

Date

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 191 OF 212
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NAME OF COMMITTEE (In Full) Working Families Party PAC			FEC IDENTIFICATION NUMBER ▼ C C00606962	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y				
Full Name of Payee Community Labor Administrative Services *			☒ Memo Item Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 18 / 2026	
Mailing Address 77 Sands St			Amount 3000.00	
City Brooklyn	State NY	Zip Code 11201-1431	Transaction ID : 500002960 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 18 / 2026	
Purpose of Expenditure Texting (estimate)			Category/ Type	
Name of Federal Candidate: Rabb, Christopher, , ,			☒ Support Office Sought: ☒ House District: 03 ☐ Oppose ☐ President ☐ Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☒ Primary ☐ General 517937.37 ☐ Other (specify) ▶	
Full Name of Payee Community Labor Administrative Services *			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 28 / 2026	
Mailing Address 77 Sands St			Amount 18.00	
City Brooklyn	State NY	Zip Code 11201-1431	Transaction ID : 500003079 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 28 / 2026	
Purpose of Expenditure Phonebanks			Category/ Type	
Name of Federal Candidate: Villegas, Randy, , ,			☒ Support Office Sought: ☒ House District: 22 ☐ Oppose ☐ President ☐ Senate State: CA	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☒ Primary ☐ General 653478.90 ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures ▶ 0.00				
(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶				
(c) TOTAL Independent Expenditures ▶				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature Boland, Mike, , ,			Date M M / D D / Y Y Y Y Y Y 06 / 20 / 2026	

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ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) Working Families Party PAC				FEC IDENTIFICATION NUMBER ▼ C C00606962	
Check if ☐ 24-hour report ☐ 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Community Labor Administrative Services *			☒ Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 31 / 2026
Mailing Address 77 Sands St			City Brooklyn		State NY
Zip Code 11201-1431			Amount 995.10		Transaction ID : 500003158
Purpose of Expenditure Texting & phonebanking. Not reported in the 24H report - estimates were less than \$1k for expenses			Category/Type 		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 31 / 2026
Name of Federal Candidate: Wahab, Aisha, , ,			☒ Support ☐ Oppose		Office Sought: ☒ House ☐ President ☐ Senate District: 14 State: CA
Calendar Year-To-Date Per Election for Office Sought			 1166.16		Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶
Full Name of Payee Community Labor Administrative Services *			☒ Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 31 / 2026
Mailing Address 77 Sands St			City Brooklyn		State NY
Zip Code 11201-1431			Amount 40.69		Transaction ID : 500003160
Purpose of Expenditure Phonebanks			Category/Type 		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 31 / 2026
Name of Federal Candidate: Simon, Lateefah, , ,			☒ Support ☐ Oppose		Office Sought: ☒ House ☐ President ☐ Senate District: 12 State: CA
Calendar Year-To-Date Per Election for Office Sought			 169.13		Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures					 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....					
(c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Boland, Mike, , ,				Date M M / D D / Y Y Y Y Y Y 06 / 20 / 2026	

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 193 OF 212
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NAME OF COMMITTEE (In Full) Working Families Party PAC			FEC IDENTIFICATION NUMBER ▼ C C00606962	
Check if ☐ 24-hour report ☐ 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y				
Full Name of Payee Community Labor Administrative Services *			☒ Memo Item Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 31 / 2026	
Mailing Address 77 Sands St			Amount 22.55	
City Brooklyn	State NY	Zip Code 11201-1431	Transaction ID : 500003161 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 31 / 2026	
Purpose of Expenditure Phone banking		Category/ Type		
Name of Federal Candidate: Gonzales-Torres, Angela, , ,			☒ Support Office Sought: ☒ House District: <u>34</u> ☐ Oppose ☐ President ☐ Senate State: <u>CA</u>	
Calendar Year-To-Date Per Election for Office Sought 5742.78			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
Full Name of Payee Community Labor Administrative Services *			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 31 / 2026	
Mailing Address 77 Sands St			Amount 56.30	
City Brooklyn	State NY	Zip Code 11201-1431	Transaction ID : 500003164 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 31 / 2026	
Purpose of Expenditure Texting & phonebanks		Category/ Type		
Name of Federal Candidate: Khanna, Rohit, , ,			☒ Support Office Sought: ☒ House District: <u>17</u> ☐ Oppose ☐ President ☐ Senate State: <u>CA</u>	
Calendar Year-To-Date Per Election for Office Sought 184.74			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures			0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Boland, Mike, , ,</u>			Date M M / D D / Y Y Y Y Y Y 06 / 20 / 2026	

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 194 OF 212
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NAME OF COMMITTEE (In Full) Working Families Party PAC			FEC IDENTIFICATION NUMBER ▼ C C00606962	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y				
Full Name of Payee Community Labor Administrative Services *			☒ Memo Item Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y	
Mailing Address 77 Sands St			Amount 209.30	
City Brooklyn	State NY	Zip Code 11201-1431	Transaction ID : 500003165 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y	
Purpose of Expenditure Texting & phonebanks			Category/ Type	
Name of Federal Candidate: Chan, Connie, , ,			☒ Support Office Sought: ☒ House District: <u>11</u> ☐ Oppose ☐ President ☐ Senate State: <u>CA</u>	
Calendar Year-To-Date Per Election for Office Sought 6270.63			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶ _____	
Full Name of Payee Community Labor Administrative Services *			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y	
Mailing Address 77 Sands St			Amount 19.71	
City Brooklyn	State NY	Zip Code 11201-1431	Transaction ID : 500003171 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y	
Purpose of Expenditure Phonebank			Category/ Type	
Name of Federal Candidate: Vang, Mai, , ,			☒ Support Office Sought: ☒ House District: <u>07</u> ☐ Oppose ☐ President ☐ Senate State: <u>CA</u>	
Calendar Year-To-Date Per Election for Office Sought 172113.63			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures 0.00 (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. <u>Boland, Mike, , ,</u> Signature Date M M / D D / Y Y Y Y Y Y				

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 195 OF 212
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Working Families Party PAC		FEC IDENTIFICATION NUMBER ▼ C C00606962	
Check if ☐ 24-hour report ☐ 48-hour report		New report Amends report filed on MM / DD / YYYY	
Full Name of Payee Corazon Printing ☐ Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 30 / 2026	
Mailing Address 6650 W 120th Ave		Amount 1024.14	
City Broomfield	State CO	Zip Code 80020-7614	Transaction ID : 500003138 Date of Disbursement or Obligation MM / DD / YYYY 05 / 27 / 2026
Purpose of Expenditure Printed literature		Category/ Type	
Name of Federal Candidate: Rutinel, Manny, , ,		Office Sought: ☒ Support ☐ Oppose ☐ President ☐ Senate State: CO	
Calendar Year-To-Date Per Election for Office Sought 1024.14		Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
Full Name of Payee Corazon Printing ☐ Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 30 / 2026	
Mailing Address 6650 W 120th Ave		Amount 1024.15	
City Broomfield	State CO	Zip Code 80020-7614	Transaction ID : 500003139 Date of Disbursement or Obligation MM / DD / YYYY 05 / 27 / 2026
Purpose of Expenditure Printed literature		Category/ Type	
Name of Federal Candidate: Gonzales, Julie, , ,		Office Sought: ☐ House ☐ Senate State: CO ☐ President ☒ Senate	
Calendar Year-To-Date Per Election for Office Sought 1024.15		Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures		2048.29	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <u>Boland, Mike, , ,</u>		Date MM / DD / YYYY 06 / 20 / 2026	

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 196 OF 212
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Working Families Party PAC			FEC IDENTIFICATION NUMBER ▼ C C00606962	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M M D D D Y Y Y Y Y Y				
Full Name of Payee Debra Schommer Media Group ☐ Memo Item			Date of Public Distribution/Dissemination M M M D D D Y Y Y Y Y Y 05 06 2026	
Mailing Address 10153 Riverside Dr # 343			Amount 150000.00	
City Toluca Lake	State CA	Zip Code 91602-2562	Transaction ID : 500002582 Date of Disbursement or Obligation M M M D D D Y Y Y Y Y Y 05 06 2026	
Purpose of Expenditure TV Ads FEC-1974689			Category/ Type	
Name of Federal Candidate: Rabb, Christopher, , ,			☒ Support ☐ Oppose Office Sought: ☒ House ☐ President ☐ Senate District: 03 State: PA	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
517937.37				
Full Name of Payee Debra Schommer Media Group ☐ Memo Item			Date of Public Distribution/Dissemination M M M D D D Y Y Y Y Y Y 05 12 2026	
Mailing Address 10153 Riverside Dr # 343			Amount 100000.00	
City Toluca Lake	State CA	Zip Code 91602-2562	Transaction ID : 500002598 Date of Disbursement or Obligation M M M D D D Y Y Y Y Y Y 05 12 2026	
Purpose of Expenditure TV Ads ACCEPTED FEC-1979357 ACCEPTED FEC-1976308 ACCEPTED FEC-1974688			Category/ Type	
Name of Federal Candidate: Rabb, Christopher, , ,			☒ Support ☐ Oppose Office Sought: ☒ House ☐ President ☐ Senate District: 03 State: PA	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
517937.37				
(a) SUBTOTAL of Itemized Independent Expenditures			250000.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Boland, Mike, , ,</u>			Date M M M D D D Y Y Y Y Y Y 06 20 2026	

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 197 OF 212
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Working Families Party PAC			FEC IDENTIFICATION NUMBER ▼ C C00606962	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y				
Full Name of Payee Debra Schommer Media Group ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y 05 / 12 / 2026	
Mailing Address 10153 Riverside Dr # 343			Amount 95000.00	
City Toluca Lake	State CA	Zip Code 91602-2562	Transaction ID : 500002599 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y 05 / 12 / 2026	
Purpose of Expenditure Digital Ads ACCEPTED FEC-1979357 ACCEPTED FEC-1976308 ACCEPTED FEC-1974688			Category/Type	
Name of Federal Candidate: Rabb, Christopher, , ,			☒ Support ☐ Oppose Office Sought: ☒ House ☐ President ☐ Senate District: 03 State: PA	
Calendar Year-To-Date Per Election for Office Sought 517937.37			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
Full Name of Payee Debra Schommer Media Group ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y 05 / 12 / 2026	
Mailing Address 10153 Riverside Dr # 343			Amount 70000.00	
City Toluca Lake	State CA	Zip Code 91602-2562	Transaction ID : 500002620 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y 05 / 12 / 2026	
Purpose of Expenditure Digital Ads ACCEPTED FEC-1979357 ACCEPTED FEC-1976308 ACCEPTED FEC-1974688			Category/Type	
Name of Federal Candidate: Street, Sharif, , ,			☐ Support ☒ Oppose Office Sought: ☒ House ☐ President ☐ Senate District: 03 State: PA	
Calendar Year-To-Date Per Election for Office Sought 517937.37			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures			165000.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Boland, Mike, , ,</u>			Date M M / D D / Y Y Y Y Y 06 / 20 / 2026	

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 198 OF 212
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Working Families Party PAC		FEC IDENTIFICATION NUMBER ▼ C C00606962	
Check if ☐ 24-hour report ☐ 48-hour report		New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Debra Schommer Media Group ☐ Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 18 / 2026	
Mailing Address 10153 Riverside Dr # 343		Amount 15000.00	
City Toluca Lake	State CA	Zip Code 91602-2562	Transaction ID : 500002624
Purpose of Expenditure Digital Ads FEC - 1976124		Category/ Type 	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 18 / 2026
Name of Federal Candidate: Rabb, Christopher, , , ☒ Support ☐ Oppose		Office Sought: ☒ House ☐ President ☐ Senate District: 03 State: PA	
Calendar Year-To-Date Per Election for Office Sought 517937.37		Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
Full Name of Payee Image Cube ☒ Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 15 / 2026	
Mailing Address 15840 Monte St Ste 109		Amount 142.15	
City Sylmar	State CA	Zip Code 91342-7670	Transaction ID : 500002607
Purpose of Expenditure Printing		Category/ Type 	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 15 / 2026
Name of Federal Candidate: Gonzales-Torres, Angela, , , ☒ Support ☐ Oppose		Office Sought: ☒ House ☐ President ☐ Senate District: 34 State: CA	
Calendar Year-To-Date Per Election for Office Sought 5742.78		Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures		15000.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature Boland, Mike, , ,		Date M M / D D / Y Y Y Y Y Y 06 / 20 / 2026	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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NAME OF COMMITTEE (In Full) Working Families Party PAC	FEC IDENTIFICATION NUMBER ▼ C C00606962
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M M D D D Y Y Y Y Y Y	

Full Name of Payee Image Cube *	☒ Memo Item	Date of Public Distribution/Dissemination M M M D D D Y Y Y Y Y Y
Mailing Address 15840 Monte St Ste 109		Amount 284.30 Transaction ID : 500002612 Date of Disbursement or Obligation M M M D D D Y Y Y Y Y Y
City Sylmar	State CA	
Zip Code 91342-7670	Category/Type	
Purpose of Expenditure Printing		Name of Federal Candidate: Villegas, Randy, , ,
Calendar Year-To-Date Per Election for Office Sought 653478.90		Office Sought: ☒ House District: 22 ☐ President ☐ Senate State: CA Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶

Full Name of Payee Image Cube *	☒ Memo Item	Date of Public Distribution/Dissemination M M M D D D Y Y Y Y Y Y
Mailing Address 15840 Monte St Ste 109		Amount 142.15 Transaction ID : 500003154 Date of Disbursement or Obligation M M M D D D Y Y Y Y Y Y
City Sylmar	State CA	
Zip Code 91342-7670	Category/Type	
Purpose of Expenditure Printing		Name of Federal Candidate: Vang, Mai, , ,
Calendar Year-To-Date Per Election for Office Sought 172113.63		Office Sought: ☒ House District: 07 ☐ President ☐ Senate State: CA Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Boland, Mike, , ,
 Signature

Date

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2026

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NAME OF COMMITTEE (In Full) Working Families Party PAC			FEC IDENTIFICATION NUMBER ▼ C C00606962	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y				
Full Name of Payee Image Cube *			☒ Memo Item Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 22 / 2026	
Mailing Address 15840 Monte St Ste 109			Amount 516.73	
City Sylmar	State CA	Zip Code 91342-7670	Transaction ID : 500003070 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 22 / 2026	
Purpose of Expenditure Printing			Category/ Type	
Name of Federal Candidate: Chan, Connie, , ,			☒ Support Office Sought: ☒ House District: <u>11</u> ☐ Oppose ☐ President ☐ Senate State: <u>CA</u>	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☒ Primary ☐ General 6270.63 ☐ Other (specify) ▶	
Full Name of Payee LC Media LLC			☐ Memo Item Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 06 / 2026	
Mailing Address 1604 Fawn Ln			Amount 17816.76	
City Huntingdon Valley	State PA	Zip Code 19006-7918	Transaction ID : 500002539 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 05 / 2026	
Purpose of Expenditure Digital Ads Amended \$17,816.76 support Randy Villegas, \$17,816.76 Oppose Jasmeet Bains.			Category/ Type	
Name of Federal Candidate: Villegas, Randy, , ,			☒ Support Office Sought: ☒ House District: <u>22</u> ☐ Oppose ☐ President ☐ Senate State: <u>CA</u>	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☒ Primary ☐ General 653478.90 ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures			17816.76	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Boland, Mike, , ,</u>			Date M M / D D / Y Y Y Y Y Y 06 / 20 / 2026	

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NAME OF COMMITTEE (In Full) Working Families Party PAC			FEC IDENTIFICATION NUMBER ▼ C C00606962	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y				
Full Name of Payee LC Media LLC ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 06 / 2026	
Mailing Address 1604 Fawn Ln			Amount 6924.17	
City Huntingdon Valley	State PA	Zip Code 19006-7918	Transaction ID : 500002540 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 05 / 2026	
Purpose of Expenditure TV ads production			Category/ Type	
Name of Federal Candidate: Villegas, Randy, , ,			☒ Support ☐ Oppose Office Sought: ☒ House ☐ Senate District: 22 ☐ President ☐ State: CA	
Calendar Year-To-Date Per Election for Office Sought 653478.90			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
Full Name of Payee LC Media LLC ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 22 / 2026	
Mailing Address 1604 Fawn Ln			Amount 17816.76	
City Huntingdon Valley	State PA	Zip Code 19006-7918	Transaction ID : 500003071 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 05 / 2026	
Purpose of Expenditure Digital Ads. Reported with 24-hour, support Randy Villegas on 5/5/26 1974688 and amended to split			Category/ Type	
Name of Federal Candidate: BAINS, JASMEET, , ,			☐ Support ☒ Oppose Office Sought: ☒ House ☐ Senate District: 22 ☐ President ☐ State: CA	
Calendar Year-To-Date Per Election for Office Sought 653478.90			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures			24740.93	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Boland, Mike, , ,</u>			Date M M / D D / Y Y Y Y Y Y 06 / 20 / 2026	

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NAME OF COMMITTEE (In Full) Working Families Party PAC			FEC IDENTIFICATION NUMBER ▼ C C00606962	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y				
Full Name of Payee LC Media LLC ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 11 / 2026	
Mailing Address 1604 Fawn Ln			Amount 25000.00	
City Huntingdon Valley	State PA	Zip Code 19006-7918	Transaction ID : 500002594 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 11 / 2026	
Purpose of Expenditure Digital ads			Category/ Type	
Name of Federal Candidate: Vang, Mai, , ,			☒ Support ☐ Oppose Office Sought: ☒ House ☐ President ☐ Senate District: 07 State: CA	
Calendar Year-To-Date Per Election for Office Sought 172113.63			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
Full Name of Payee LC Media LLC ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 11 / 2026	
Mailing Address 1604 Fawn Ln			Amount 10000.00	
City Huntingdon Valley	State PA	Zip Code 19006-7918	Transaction ID : 500002595 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 11 / 2026	
Purpose of Expenditure Digital ad production			Category/ Type	
Name of Federal Candidate: Vang, Mai, , ,			☒ Support ☐ Oppose Office Sought: ☒ House ☐ President ☐ Senate District: 07 State: CA	
Calendar Year-To-Date Per Election for Office Sought 172113.63			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures 35000.00 (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Boland, Mike, , ,</u>			Date M M / D D / Y Y Y Y Y Y 06 / 20 / 2026	

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NAME OF COMMITTEE (In Full) Working Families Party PAC			FEC IDENTIFICATION NUMBER ▼ C C00606962	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y				
Full Name of Payee LC Media LLC ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 12 / 2026	
Mailing Address 1604 Fawn Ln			Amount 75000.00	
City Huntingdon Valley	State PA	Zip Code 19006-7918	Transaction ID : 500002601 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 12 / 2026	
Purpose of Expenditure Digital ads. Amended \$75,000 support Randy Villegas, \$75,000 Oppose Jasmeet Bains.		Category/ Type		
Name of Federal Candidate: Villegas, Randy, , , ☒ Support ☐ Oppose			Office Sought: ☒ House District: 22 ☐ President ☐ Senate State: CA	
Calendar Year-To-Date Per Election for Office Sought 653478.90			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
Full Name of Payee LC Media LLC ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 22 / 2026	
Mailing Address 1604 Fawn Ln			Amount 75000.00	
City Huntingdon Valley	State PA	Zip Code 19006-7918	Transaction ID : 500003072 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 12 / 2026	
Purpose of Expenditure Digital ads. Amended \$75,000 support Randy Villegas, \$75,000 Oppose Jasmeet Bains.		Category/ Type		
Name of Federal Candidate: BAINS, JASMEET, , , ☐ Support ☒ Oppose			Office Sought: ☒ House District: 22 ☐ President ☐ Senate State: CA	
Calendar Year-To-Date Per Election for Office Sought 653478.90			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures			150000.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Boland, Mike, , ,</u>			Date M M / D D / Y Y Y Y Y Y 06 / 20 / 2026	

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NAME OF COMMITTEE (In Full) Working Families Party PAC			FEC IDENTIFICATION NUMBER ▼ C C00606962	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y				
Full Name of Payee LC Media LLC ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 14 / 2026	
Mailing Address 1604 Fawn Ln			Amount 35000.00	
City Huntingdon Valley	State PA	Zip Code 19006-7918	Transaction ID : 500002605 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 14 / 2026	
Purpose of Expenditure Digital Ads		Category/ Type		
Name of Federal Candidate: Vang, Mai, , ,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 07 ☐ President ☐ Senate State: CA	
Calendar Year-To-Date Per Election for Office Sought		172113.63	Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
Full Name of Payee LC Media LLC ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 15 / 2026	
Mailing Address 1604 Fawn Ln			Amount 125000.00	
City Huntingdon Valley	State PA	Zip Code 19006-7918	Transaction ID : 500002614 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 15 / 2026	
Purpose of Expenditure TV ads. Amended \$125,000 support Randy Villegas, \$125,000 Oppose Jasmeet Bains.		Category/ Type		
Name of Federal Candidate: Villegas, Randy, , ,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 22 ☐ President ☐ Senate State: CA	
Calendar Year-To-Date Per Election for Office Sought		653478.90	Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures			160000.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Boland, Mike, , ,</u>			Date M M / D D / Y Y Y Y Y Y 06 / 20 / 2026	

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 205 OF 212
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NAME OF COMMITTEE (In Full) Working Families Party PAC		FEC IDENTIFICATION NUMBER ▼ C C00606962				
Check if ☐ 24-hour report ☐ 48-hour report		New report Amends report filed on MM / DD / YYYY				
Full Name of Payee LC Media LLC ☐ Memo Item <u>Digital ads. Amended \$125,000 support Randy Villegas, \$125,000 Oppose Jasmeet Bains.</u> Mailing Address 1604 Fawn Ln <table border="1" style="width:100%; border-collapse: collapse; margin-top: 5px;"><tr><td style="width:40%;">City Huntingdon Valley</td><td style="width:10%;">State PA</td><td style="width:50%;">Zip Code 19006-7918</td></tr></table> Purpose of Expenditure TV Ads Category/Type		City Huntingdon Valley	State PA	Zip Code 19006-7918	Date of Public Distribution/Dissemination MM / DD / YYYY Amount 125000.00 Transaction ID : 500003073 Date of Disbursement or Obligation MM / DD / YYYY	
City Huntingdon Valley	State PA	Zip Code 19006-7918				
Name of Federal Candidate: BAINS, JASMEET, , , ☐ Support ☒ Oppose		Office Sought: ☒ House District: 22 ☐ President ☐ Senate State: CA				
Calendar Year-To-Date Per Election for Office Sought 653478.90		Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶				
Full Name of Payee LC Media LLC ☐ Memo Item Mailing Address 1604 Fawn Ln <table border="1" style="width:100%; border-collapse: collapse; margin-top: 5px;"><tr><td style="width:40%;">City Huntingdon Valley</td><td style="width:10%;">State PA</td><td style="width:50%;">Zip Code 19006-7918</td></tr></table> Purpose of Expenditure Mistakenly reported expense that was actually an amendment Category/Type		City Huntingdon Valley	State PA	Zip Code 19006-7918	Date of Public Distribution/Dissemination MM / DD / YYYY Amount 0.00 Transaction ID : 500003074 Date of Disbursement or Obligation MM / DD / YYYY	
City Huntingdon Valley	State PA	Zip Code 19006-7918				
Name of Federal Candidate: Villegas, Randy, , , ☒ Support ☐ Oppose		Office Sought: ☒ House District: 22 ☐ President ☐ Senate State: CA				
Calendar Year-To-Date Per Election for Office Sought 653478.90		Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶				
(a) SUBTOTAL of Itemized Independent Expenditures		125000.00				
(b) SUBTOTAL of Unitemized Independent Expenditures.....						
(c) TOTAL Independent Expenditures						
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.						
Signature Boland, Mike, , ,		Date MM / DD / YYYY				

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NAME OF COMMITTEE (In Full) Working Families Party PAC			FEC IDENTIFICATION NUMBER ▼ C C00606962	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on			M M / D D / Y Y Y Y Y Y	
Full Name of Payee LC Media LLC		☐ Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 28 / 2026	
Mailing Address 1604 Fawn Ln		City Huntingdon Valley	State PA	Zip Code 19006-7918
Amount 20000.00				
Purpose of Expenditure Digital ads		Category/ Type	Transaction ID : 500003075 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 28 / 2026	
Name of Federal Candidate: Matsui, Doris, , ,		☐ Support ☒ Oppose	Office Sought: ☒ House District: 07 ☐ President ☐ Senate State: CA	
Calendar Year-To-Date Per Election for Office Sought		172113.63	Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
Full Name of Payee LC Media LLC		☐ Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 29 / 2026	
Mailing Address 1604 Fawn Ln		City Huntingdon Valley	State PA	Zip Code 19006-7918
Amount 15000.00				
Purpose of Expenditure Digital ads		Category/ Type	Transaction ID : 500003076 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 29 / 2026	
Name of Federal Candidate: BAINS, JASMEET, , ,		☐ Support ☒ Oppose	Office Sought: ☒ House District: 22 ☐ President ☐ Senate State: CA	
Calendar Year-To-Date Per Election for Office Sought		653478.90	Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures			35000.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Boland, Mike, , ,</u>			Date M M / D D / Y Y Y Y Y Y 06 / 20 / 2026	

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NAME OF COMMITTEE (In Full) Working Families Party PAC			FEC IDENTIFICATION NUMBER ▼ C C00606962	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on MM / DD / YYYY				
Full Name of Payee LC Media LLC ☐ Memo Item			Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 29 / 2026	
Mailing Address 1604 Fawn Ln			Amount 15000.00	
City Huntingdon Valley	State PA	Zip Code 19006-7918	Transaction ID : 500003077 Date of Disbursement or Obligation MM / DD / YYYY 05 / 29 / 2026	
Purpose of Expenditure Digital ads		Category/ Type		
Name of Federal Candidate: Villegas, Randy, , , ☒ Support ☐ Oppose			Office Sought: ☒ House District: 22 ☐ President ☐ Senate State: CA	
Calendar Year-To-Date Per Election for Office Sought 653478.90			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
Full Name of Payee Minuteman Press of Philadelphia * ☒ Memo Item			Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 16 / 2026	
Mailing Address 932 E Hunting Park Ave			Amount 198.80	
City Philadelphia	State PA	Zip Code 19124-4807	Transaction ID : 500003155 Date of Disbursement or Obligation MM / DD / YYYY 05 / 16 / 2026	
Purpose of Expenditure This vendor reported in FEC1976211 in a 24H notice. It was in addition to the printing estimation		Category/ Type		
Name of Federal Candidate: Rabb, Christopher, , , ☒ Support ☐ Oppose			Office Sought: ☒ House District: 03 ☐ President ☐ Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought 517937.37			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures 15000.00 (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Boland, Mike, , ,</u>			Date MM / DD / YYYY 06 / 20 / 2026	

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NAME OF COMMITTEE (In Full) Working Families Party PAC			FEC IDENTIFICATION NUMBER ▼ C C00606962	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M M / D D D / Y Y Y Y Y Y				
Full Name of Payee Minuteman Press of Philadelphia ☐ Memo Item			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y	
Mailing Address 932 E Hunting Park Ave			Amount 3604.17	
City Philadelphia	State PA	Zip Code 19124-4807	Transaction ID : 500002617 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y	
Purpose of Expenditure Printed literature (\$596.40 in-kind to Free The Ballot)		Category/ Type 006	M M M / D D D / Y Y Y Y Y Y	
Name of Federal Candidate: Rabb, Christopher, , , ☒ Support ☐ Oppose			Office Sought: ☒ House District: 03 ☐ President ☐ Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought 517937.37			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
Full Name of Payee Minuteman Press of Philadelphia ☐ Memo Item			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y	
Mailing Address 932 E Hunting Park Ave			Amount 3556.19	
City Philadelphia	State PA	Zip Code 19124-4807	Transaction ID : 500002618 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y	
Purpose of Expenditure Printing		Category/ Type 006	M M M / D D D / Y Y Y Y Y Y	
Name of Federal Candidate: Brooks, Bob, , , ☒ Support ☐ Oppose			Office Sought: ☒ House District: 07 ☐ President ☐ Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought 37030.70			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures			7160.36	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Boland, Mike, , ,</u>			Date M M M / D D D / Y Y Y Y Y Y	

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NAME OF COMMITTEE (In Full) Working Families Party PAC			FEC IDENTIFICATION NUMBER ▼ C C00606962	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on			M M / D D / Y Y Y Y Y Y	
Full Name of Payee Minuteman Press of Philadelphia		☐ Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 19 / 2026	
Mailing Address 932 E Hunting Park Ave		Amount 1309.40		
City Philadelphia	State PA	Zip Code 19124-4807	Transaction ID : 500002961 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 21 / 2026	
Purpose of Expenditure Printed literature (\$872.93 in-kind to API PA Votes)		Category/ Type		
Name of Federal Candidate: Rabb, Christopher, , ,		☒ Support ☐ Oppose	Office Sought: ☒ House ☐ President ☐ Senate District: 03 State: PA	
Calendar Year-To-Date Per Election for Office Sought		517937.37 Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶		
Full Name of Payee Minuteman Press Pittsburgh		☐ Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 19 / 2026	
Mailing Address 521 E Ohio St 15212		Amount 825.13		
City Pittsburgh	State PA	Zip Code 15212-5516	Transaction ID : 500003174 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 21 / 2026	
Purpose of Expenditure Printed literature		Category/ Type		
Name of Federal Candidate: Lee, Summer, , ,		☒ Support ☐ Oppose	Office Sought: ☒ House ☐ President ☐ Senate District: 12 State: PA	
Calendar Year-To-Date Per Election for Office Sought		17298.13 Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			2134.53	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature Boland, Mike, , ,		Date M M / D D / Y Y Y Y Y Y 06 / 20 / 2026		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 211 OF 212
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Working Families Party PAC			FEC IDENTIFICATION NUMBER ▼ C C00606962	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on MM / DD / YYYY				
Full Name of Payee Red Horse Strategies ☐ Memo Item			Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 02 / 2026	
Mailing Address 55 Washington St			Amount 34738.88	
City Brooklyn	State NY	Zip Code 11201-1036	Transaction ID : 500002533 Date of Disbursement or Obligation MM / DD / YYYY 05 / 03 / 2026	
Purpose of Expenditure Direct Mail FEC - 1972423		Category/ Type		
Name of Federal Candidate: Vang, Mai, , ,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 07 ☐ President ☐ Senate State: CA	
Calendar Year-To-Date Per Election for Office Sought		172113.63 Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶		
Full Name of Payee Red Horse Strategies ☐ Memo Item			Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 27 / 2026	
Mailing Address 55 Washington St			Amount 34738.88	
City Brooklyn	State NY	Zip Code 11201-1036	Transaction ID : 500002510 Date of Disbursement or Obligation MM / DD / YYYY 05 / 04 / 2026	
Purpose of Expenditure Direct Mail FEC-1971566		Category/ Type		
Name of Federal Candidate: Vang, Mai, , ,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 07 ☐ President ☐ Senate State: CA	
Calendar Year-To-Date Per Election for Office Sought		172113.63 Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			69477.76	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature Boland, Mike, , ,		Date MM / DD / YYYY 06 / 20 / 2026		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 212 OF 212
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Working Families Party PAC			FEC IDENTIFICATION NUMBER ▼ C C00606962	
Check if ☐ 24-hour report ☐ 48-hour report			New report Amends report filed on MM / DD / YYYY	
Full Name of Payee Red Horse Strategies			Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 08 / 2026	
Mailing Address 55 Washington St			Amount 31186.04	
City Brooklyn	State NY	Zip Code 11201-1036	Transaction ID : 500002591 Date of Disbursement or Obligation MM / DD / YYYY 05 / 07 / 2026	
Purpose of Expenditure Direct Mail FEC - 1973664		Category/ Type		
Name of Federal Candidate: Vang, Mai, , ,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 07 ☐ President ☐ Senate State: CA	
Calendar Year-To-Date Per Election for Office Sought		172113.63		Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶
Full Name of Payee Turn it Blue			Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 05 / 2026	
Mailing Address 780 Utica Ave			Amount 8250.00	
City Boulder	State CO	Zip Code 80304-0755	Transaction ID : 500002542 Date of Disbursement or Obligation MM / DD / YYYY 05 / 04 / 2026	
Purpose of Expenditure Digital ads FEC - 197256		Category/ Type		
Name of Federal Candidate: Larson, John, B, ,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 01 ☐ President ☐ Senate State: CT	
Calendar Year-To-Date Per Election for Office Sought		11750.00		Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			39436.04	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				
(c) TOTAL Independent Expenditures			1137217.97	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Boland, Mike, , ,</u>			Date MM / DD / YYYY 06 / 20 / 2026	