

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

Flip the 49th! Neighbors in Action

ADDRESS (number and street)

5145 Avenida Encinas, Suite I

Check if different than previously reported. (ACC)

Carlsbad

CA

92008

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00662312

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

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

- (c) 12-Day PRE-Election Report for the:
- Primary (12P)
 - General (12G)
 - Runoff (12R)
 - Convention (12C)
 - Special (12S)

Election on [MM] / [DD] / [YYYY] in the State of []

- (d) 30-Day POST-Election Report for the:
- General (30G)
 - Runoff (30R)
 - Special (30S)

Election on [MM] / [DD] / [YYYY] in the State of []

5. Covering Period

[MM] / [DD] / [YYYY] 07 / 01 / 2018

through

[MM] / [DD] / [YYYY] 09 / 30 / 2018

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

Lawson-Remer, Terra, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Lawson-Remer, Terra, , ,

[Electronically Filed]

Date

[MM] / [DD] / [YYYY] 10 / 25 / 2018

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

Office Use Only

FEC FORM 3X Rev. 05/2016

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Flip the 49th! Neighbors in Action

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>		<input type="text" value="327435.14"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="149047.64"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="129254.01"/>	<input type="text" value="306078.89"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="278301.65"/>	<input type="text" value="633514.03"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="195761.12"/>	<input type="text" value="550973.50"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="82540.53"/>	<input type="text" value="82540.53"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="25203.51"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Flip the 49th! Neighbors in Action

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	3325.00
(ii) Unitemized	85.00	2452.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	85.00	5777.50
(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)	85.00	5777.50
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	129169.01	300301.39
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)).....▶	129254.01	306078.89
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	129254.01	306078.89

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	3.37	4080.08
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	3.37	4080.08
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	238.82
24. Independent Expenditures (use Schedule E)	104879.28	167579.95
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).....	90878.47	379074.65
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)) ..	195761.12	550973.50
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	195761.12	550973.50

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	85.00	5777.50
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	85.00	5777.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	3.37	4080.08
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	3.37	4080.08

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA
Transaction ID :

Update summary page, schedule D and schedule E.

Form/Schedule:
Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 171
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Flip the 49th! Neighbors in Action

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. American Combat Veterans of War

Mailing Address 2430 Unicornio

City Carlsbad	State CA	Zip Code 92009
------------------	-------------	-------------------

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 ▼
2400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		16		2018

Transaction ID : INCA879

Amount of Each Receipt this Period
400.00

Memo Item
Rental Income

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. American Combat Veterans of War

Mailing Address 2430 Unicornio

City Carlsbad	State CA	Zip Code 92009
------------------	-------------	-------------------

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 ▼
2400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		15		2018

Transaction ID : INCA909

Amount of Each Receipt this Period
600.00

Memo Item
Rental Income

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

Mailing Address 14082 Recuerdo Drive

City Del Mar	State CA	Zip Code 92014
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		05		2018

Transaction ID : INCA901

Amount of Each Receipt this Period
275.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1275.00
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: SA17

Transaction ID : INCA879

Non-Contribution Account

Form/Schedule: SA17

Transaction ID: INCA909

Non-Contribution Account

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA17

Transaction ID : INCA901

Received through conduit ActBlue; Non-Contribution Account

Form/Schedule:

Transaction ID:

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 171
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Flip the 49th! Neighbors in Action

A. Berman, Brad, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3291 Greenhills Drive

City Lafayette	State CA	Zip Code 94549
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self-Employed	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
09		21		2018

Transaction ID : INCA1055

Amount of Each Receipt this Period
500.00

Memo Item

B. California State Council of Service Employees Political Committee
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1130 K Street, Suite 300

City Sacramento	State CA	Zip Code 95814
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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 ▼
30841.07

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2018

Transaction ID : INCA1022

Amount of Each Receipt this Period
5026.40

Memo Item
Staff Time 9/11-9/30; In-kind

C. California State Council of Service Employees Political Committee
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1130 K Street, Suite 300

City Sacramento	State CA	Zip Code 95814
--------------------	-------------	-------------------

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 ▼
30841.07

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2018

Transaction ID : INCA1025

Amount of Each Receipt this Period
814.67

Memo Item
Campaign Mileage & Food 9/11-9/30; In-kind

SUBTOTAL of Receipts This Page (optional).....	6341.07
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: SA17

Transaction ID : INCA1055

Received through conduit ActBlue; Non-Contribution Account

Form/Schedule: SA17

Transaction ID: INCA1022

Non-Contribution Account

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA17

Transaction ID : INCA1025

Non-Contribution Account

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 171
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Flip the 49th! Neighbors in Action

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Committee for Working Families, Sponsored by the California Labor Federation, AFL-CIO

Mailing Address 555 Capitol Mall, Suite 400

City Sacramento	State CA	Zip Code 95814
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : INCA1020

Amount of Each Receipt this Period

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
D'allaird, William, , ,

Mailing Address 15945 Arnold Drive

City Sonoma	State CA	Zip Code 95476
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FEC ID number of contributing federal political committee.

Name of Employer (for Individual) None	Occupation (for Individual) Not Employed
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : INCA1074

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
D'allaird, William, , ,

Mailing Address 15945 Arnold Drive

City Sonoma	State CA	Zip Code 95476
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FEC ID number of contributing federal political committee.

Name of Employer (for Individual) None	Occupation (for Individual) Not Employed
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : INCA1073

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="76000.00"/>
TOTAL This Period (last page this line number only).....	<input type="text" value=""/>

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA17

Transaction ID : INCA1020

Non-Contribution Account

Form/Schedule: SA17

Transaction ID: INCA1074

Received through conduit ActBlue; Non-Contribution Account

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA17

Transaction ID : INCA1073

Received through conduit ActBlue; Non-Contribution Account

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 171
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Flip the 49th! Neighbors in Action

A. Evons, Tom, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4196 Rochester Road
 City San Diego State CA Zip Code 92116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) None Occupation (for Individual) Unemployed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **07 / 31 / 2018**
Transaction ID : INCA899
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Evons, Tom, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4196 Rochester Road
 City San Diego State CA Zip Code 92116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) None Occupation (for Individual) Unemployed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **08 / 31 / 2018**
Transaction ID : INCA967
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Evons, Tom, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4196 Rochester Road
 City San Diego State CA Zip Code 92116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) None Occupation (for Individual) Unemployed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **09 / 30 / 2018**
Transaction ID : INCA1117
 Amount of Each Receipt this Period 50.00
 Memo Item

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA17

Transaction ID : INCA899

Received through conduit ActBlue; Non-Contribution Account

Form/Schedule: SA17

Transaction ID: INCA967

Received through conduit ActBlue; Non-Contribution Account

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA17

Transaction ID : INCA1117

Received through conduit ActBlue; Non-Contribution Account

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 171
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Flip the 49th! Neighbors in Action

A. Flip the 14

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

Mailing Address 5940 College Avenue, Suite F

City Oakland	State CA	Zip Code 94618
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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 ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		24		2018

Transaction ID : INCA1047

Amount of Each Receipt this Period
1000.00

Memo Item

B. Flip the 14

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

Mailing Address 5940 College Avenue, Suite F

City Oakland	State CA	Zip Code 94618
-----------------	-------------	-------------------

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 ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2018

Transaction ID : INCA1075

Amount of Each Receipt this Period
1000.00

Memo Item

C. Handelsman, Sarah, , ,

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

Mailing Address 25 Mesa Avenue

City Piedmont	State CA	Zip Code 94611
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)
East Bay Pediatrics Physician

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
08		04		2018

Transaction ID : INCA902

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA17

Transaction ID : INCA1047

Non-Contribution Account

Form/Schedule: SA17

Transaction ID: INCA1075

Non-Contribution Account

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA17

Transaction ID : INCA902

Received through conduit ActBlue; Non-Contribution Account

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 22 OF 171
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Flip the 49th! Neighbors in Action

A. Hare, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3901 Liggett Drive
 City San Diego State CA Zip Code 92106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) None Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 17 / 2018
Transaction ID : INCA1072
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Idell, Susan Kornblatt, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18900 Carriger Road
 City Sonoma State CA Zip Code 95476
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Idell Family Vineyards Occupation (for Individual) Proprietor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 14 / 2018
Transaction ID : INCA1021
 Amount of Each Receipt this Period 300.00
 Memo Item

C. Janda, Anne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5945 Caminito De La Taza
 City San Diego State CA Zip Code 92120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) None Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 18 / 2018
Transaction ID : INCA1067
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA17

Transaction ID : INCA1072

Received through conduit ActBlue; Non-Contribution Account

Form/Schedule: SA17

Transaction ID: INCA1021

Non-Contribution Account

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA17

Transaction ID : INCA1067

Received through conduit ActBlue; Non-Contribution Account

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 25 OF 171
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Flip the 49th! Neighbors in Action

A. Janda, Anne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5945 Caminito De La Taza
 City San Diego State CA Zip Code 92120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) None Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 18 / 2018**
Transaction ID : INCA1066
 Amount of Each Receipt this Period 150.00
 Memo Item

B. Julig, Louise, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 133 Smart Court
 City Encinitas State CA Zip Code 92024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Writer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 223.00

Date of Receipt **08 / 19 / 2018**
Transaction ID : INCA929
 Amount of Each Receipt this Period 49.00
 Memo Item

C. Julig, Louise, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 133 Smart Court
 City Encinitas State CA Zip Code 92024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Writer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 223.00

Date of Receipt **09 / 07 / 2018**
Transaction ID : INCA1015
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	219.00
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA17

Transaction ID : INCA1066

Received through conduit ActBlue; Non-Contribution Account

Form/Schedule: SA17

Transaction ID: INCA929

Received through conduit ActBlue; Non-Contribution Account

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA17

Transaction ID : INCA1015

Received through conduit ActBlue; Non-Contribution Account

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 28 OF 171
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Flip the 49th! Neighbors in Action

A. Katz, Jeff, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5483 Drover Drive
 City San Diego State CA Zip Code 92115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Jeff Katz Architecture Occupation (for Individual) Architect
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 08 / 12 / 2018
Transaction ID : INCA917
 Amount of Each Receipt this Period 1500.00
 Memo Item

B. Lammers, Aileen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 1953
 City Glen Ellen State CA Zip Code 95442
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) None Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 25 / 2018
Transaction ID : INCA1111
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Michaels, Peter, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6114 La Salle Avenue, #445
 City Oakland State CA Zip Code 94611
 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 ▼ 1500.00

Date of Receipt 09 / 10 / 2018
Transaction ID : INCA1041
 Amount of Each Receipt this Period 1500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	3500.00
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA17

Transaction ID : INCA917

Received through conduit ActBlue; Non-Contribution Account

Form/Schedule: SA17

Transaction ID: INCA1111

Received through conduit ActBlue; Non-Contribution Account

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA17

Transaction ID : INCA1041

Received through conduit ActBlue; Non-Contribution Account

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 31 OF 171
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Flip the 49th! Neighbors in Action

A. Mo, Douglas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15791 Arnold Drive
 City Sonoma State CA Zip Code 95476
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eversheds Sutherland Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt **08 / 20 / 2018**
Transaction ID : INCA971
 Amount of Each Receipt this Period 3000.00
 Memo Item

B. Oken, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 224 Pala Avenue
 City Piedmont State CA Zip Code 94611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 17 / 2018**
Transaction ID : INCA1071
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Perloff, Laura, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4050 Los Arabis Drive
 City Lafayette State CA Zip Code 94549
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Pilates Instructor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt **08 / 17 / 2018**
Transaction ID : INCA933
 Amount of Each Receipt this Period 3000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	6250.00
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`#19A-N5HCB

Form/Schedule: SA17

Transaction ID : INCA971

Received through conduit ActBlue; Non-Contribution Account

Form/Schedule: SA17

Transaction ID: INCA1071

Received through conduit ActBlue; Non-Contribution Account

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA17

Transaction ID : INCA933

Received through conduit ActBlue; Non-Contribution Account

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 34 OF 171
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Flip the 49th! Neighbors in Action

A. Planned Parenthood Pacific Southwest Action Fund

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

Mailing Address 1075 Camino Del Rio South

City San Diego	State CA	Zip Code 92108
-------------------	-------------	-------------------

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 ▼
11000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		16		2018

Transaction ID : INCA878

Amount of Each Receipt this Period
10000.00

Memo Item

B. Riskin, Victoria, , ,

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

Mailing Address 210310 Ventura Blvd.

City Woodland Hills	State CA	Zip Code 91364
------------------------	-------------	-------------------

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

Name of Employer (for Individual) None	Occupation (for Individual) Retired
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2018

Transaction ID : INCA897

Amount of Each Receipt this Period
300.00

Memo Item

C. Riskin, Victoria, , ,

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

Mailing Address 210310 Ventura Blvd.

City Woodland Hills	State CA	Zip Code 91364
------------------------	-------------	-------------------

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

Name of Employer (for Individual) None	Occupation (for Individual) Retired
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		27		2018

Transaction ID : INCA966

Amount of Each Receipt this Period
300.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	10600.00
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA17

Transaction ID : INCA878

Non-Contribution Account

Form/Schedule: SA17

Transaction ID: INCA897

Received through conduit ActBlue; Non-Contribution Account

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA17

Transaction ID : INCA966

Received through conduit ActBlue; Non-Contribution Account

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 37 OF 171
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Flip the 49th! Neighbors in Action

A. Riskin, Victoria, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 210310 Ventura Blvd.

City Woodland Hills	State CA	Zip Code 91364
------------------------	-------------	-------------------

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

Name of Employer (for Individual) None	Occupation (for Individual) Retired
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 27 / 2018

Transaction ID : INCA1116

Amount of Each Receipt this Period
300.00

Memo Item

B. Rose Kapolczynski Consulting, Inc.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 969 Colorado Blvd., Suite 103

City Los Angeles	State CA	Zip Code 90041
---------------------	-------------	-------------------

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 ▼
846.88

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 09 / 2018

Transaction ID : INCA858

Amount of Each Receipt this Period
846.88

Memo Item
Refund

C. Service Employees International Union Local 221
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4004 Kearny Mesa Road

City San Diego	State CA	Zip Code 92111
-------------------	-------------	-------------------

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 ▼
48810.45

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 01 / 2018

Transaction ID : INCA958

Amount of Each Receipt this Period
1223.30

Memo Item
Salary 7/1-7/7; In-kind

SUBTOTAL of Receipts This Page (optional).....	2370.18
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA17

Transaction ID : INCA1116

Received through conduit ActBlue; Non-Contribution Account

Form/Schedule: SA17

Transaction ID: INCA858

Non-Contribution Account

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA17

Transaction ID : INCA958

Non-Contribution Account

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 40 OF 171
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Flip the 49th! Neighbors in Action

A. Service Employees International Union Local 221

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

Mailing Address 4004 Kearny Mesa Road

City San Diego	State CA	Zip Code 92111
-------------------	-------------	-------------------

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 ▼
48810.45

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		08		2018

Transaction ID : INCA959

Amount of Each Receipt this Period
2446.60

Memo Item
Salary 7/8-7/21; In-kind

B. Service Employees International Union Local 221

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

Mailing Address 4004 Kearny Mesa Road

City San Diego	State CA	Zip Code 92111
-------------------	-------------	-------------------

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 ▼
48810.45

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		22		2018

Transaction ID : INCA960

Amount of Each Receipt this Period
2446.60

Memo Item
Salary 7/22-8/4; In-kind

C. Service Employees International Union Local 221

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

Mailing Address 4004 Kearny Mesa Road

City San Diego	State CA	Zip Code 92111
-------------------	-------------	-------------------

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 ▼
48810.45

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		05		2018

Transaction ID : INCA961

Amount of Each Receipt this Period
2446.60

Memo Item
Salary 8/5-8/18; In-kind

SUBTOTAL of Receipts This Page (optional).....	7339.80
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: SA17

Transaction ID : INCA959

Non-Contribution Account

Form/Schedule: SA17

Transaction ID: INCA960

Non-Contribution Account

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

Form/Schedule: SA17

Transaction ID : INCA961

Non-Contribution Account

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 43 OF 171
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Flip the 49th! Neighbors in Action

A. Service Employees International Union Local 221

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

Mailing Address 4004 Kearny Mesa Road

City San Diego	State CA	Zip Code 92111
-------------------	-------------	-------------------

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 ▼
48810.45

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2018

Transaction ID : INCA984

Amount of Each Receipt this Period
4893.20

Memo Item
Staff Time for Field Program 9/2-9/29; in-kind

B. Service Employees International Union Local 221

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

Mailing Address 4004 Kearny Mesa Road

City San Diego	State CA	Zip Code 92111
-------------------	-------------	-------------------

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 ▼
48810.45

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2018

Transaction ID : INCA1076

Amount of Each Receipt this Period
174.76

Memo Item
Staff Time for Field Program 9/30; in-kind

C. Stokes, Kenneth R., , ,

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

Mailing Address 488 Brazil Street

City Sonoma	State CA	Zip Code 95476
----------------	-------------	-------------------

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

Name of Employer (for Individual) None	Occupation (for Individual) Retired
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		14		2018

Transaction ID : INCA936

Amount of Each Receipt this Period
3000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	8067.96
TOTAL This Period (last page this line number only).....	125763.01

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

Form/Schedule: SA17

Transaction ID : INCA984

Non-Contribution Account

Form/Schedule: SA17

Transaction ID: INCA1076

Non-Contribution Account

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA17

Transaction ID : INCA936

Received through conduit ActBlue; Non-Contribution Account

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Flip the 49th! Neighbors in Action

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144

Purpose of Disbursement Processing Fee

001

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 16 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : EXPB883

Amount of Each Disbursement this Period

[REDACTED] 0.20

Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144

Purpose of Disbursement Processing Fee

001

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 20 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : EXPB915

Amount of Each Disbursement this Period

[REDACTED] 0.20

Memo Item

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144

Purpose of Disbursement Processing Fee

001

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 29 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : EXPB1050

Amount of Each Disbursement this Period

[REDACTED] 1.98

Memo Item

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

[REDACTED] 2.38

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

[REDACTED]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Flip the 49th! Neighbors in Action

A. ActBlue Technical Services

Full Name (Last, First, Middle Initial)

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144

Purpose of Disbursement Processing Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 30 / 2018

FEC Identification Number: C

Transaction ID : EXPB1119

Amount of Each Disbursement this Period: 0.99

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.99

TOTAL This Period (last page this line number only)..... ▶ 3.37

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Flip the 49th! Neighbors in Action

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 07 / 06 / 2018	
Mailing Address 366 Summer Street		FEC Identification Number C [] Transaction ID : EXPB845	
City Somerville	State MA	Zip Code 02144	Amount of Each Disbursement this Period [] 1.98
Purpose of Disbursement Processing Fee		Category/ Type []	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 07 / 16 / 2018	
Mailing Address 366 Summer Street		FEC Identification Number C [] Transaction ID : EXPB881	
City Somerville	State MA	Zip Code 02144	Amount of Each Disbursement this Period [] 0.99
Purpose of Disbursement Processing Fee		Category/ Type []	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 07 / 21 / 2018	
Mailing Address 366 Summer Street		FEC Identification Number C [] Transaction ID : EXPB887	
City Somerville	State MA	Zip Code 02144	Amount of Each Disbursement this Period [] 0.99
Purpose of Disbursement Processing Fee		Category/ Type []	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 3.96
TOTAL This Period (last page this line number only).....▶	[]

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : EXPB845

Non-Contribution Account

Form/Schedule: SB29

Transaction ID: EXPB881

Non-Contribution Account

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : EXPB887

Non-Contribution Account

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Flip the 49th! Neighbors in Action

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 07 / 26 / 2018	
Mailing Address 366 Summer Street		FEC Identification Number C [] Transaction ID : EXPB895	
City Somerville	State MA	Zip Code 02144	Amount of Each Disbursement this Period [] 6.92
Purpose of Disbursement Processing Fee		Category/ Type []	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 08 / 03 / 2018	
Mailing Address 366 Summer Street		FEC Identification Number C [] Transaction ID : EXPB898	
City Somerville	State MA	Zip Code 02144	Amount of Each Disbursement this Period [] 14.82
Purpose of Disbursement Processing Fee		Category/ Type []	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 08 / 03 / 2018	
Mailing Address 366 Summer Street		FEC Identification Number C [] Transaction ID : EXPB900	
City Somerville	State MA	Zip Code 02144	Amount of Each Disbursement this Period [] 1.98
Purpose of Disbursement Processing Fee		Category/ Type []	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 23.72
TOTAL This Period (last page this line number only).....▶	[]

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

Form/Schedule: SB29

Transaction ID : EXPB895

Non-Contribution Account

Form/Schedule: SB29

Transaction ID: EXPB898

Non-Contribution Account

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : EXPB900

Non-Contribution Account

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Flip the 49th! Neighbors in Action

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144

Purpose of Disbursement
Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 10 / 2018

FEC Identification Number

C []

Transaction ID : EXPB904

Amount of Each Disbursement this Period

[] 51.36

Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144

Purpose of Disbursement
Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 20 / 2018

FEC Identification Number

C []

Transaction ID : EXPB916

Amount of Each Disbursement this Period

[] 61.82

Memo Item

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144

Purpose of Disbursement
Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 24 / 2018

FEC Identification Number

C []

Transaction ID : EXPB938

Amount of Each Disbursement this Period

[] 256.93

Memo Item

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

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

[] 370.11

[]

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : EXPB904

Non-Contribution Account

Form/Schedule: SB29

Transaction ID: EXPB916

Non-Contribution Account

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : EXPB938

Non-Contribution Account

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Flip the 49th! Neighbors in Action

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 09 / 04 / 2018
Mailing Address 366 Summer Street		FEC Identification Number C Transaction ID : EXPB968 Amount of Each Disbursement this Period 13.83
City Somerville	State MA	
Zip Code 02144	Purpose of Disbursement Processing Fee	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 09 / 06 / 2018
Mailing Address 366 Summer Street		FEC Identification Number C Transaction ID : EXPB973 Amount of Each Disbursement this Period 0.99
City Somerville	State MA	
Zip Code 02144	Purpose of Disbursement Processing Fee	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 09 / 06 / 2018
Mailing Address 366 Summer Street		FEC Identification Number C Transaction ID : EXPB972 Amount of Each Disbursement this Period 120.48
City Somerville	State MA	
Zip Code 02144	Purpose of Disbursement Processing Fee	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

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

135.30

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : EXPB968

Non-Contribution Account

Form/Schedule: SB29

Transaction ID: EXPB973

Non-Contribution Account

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : EXPB972

Non-Contribution Account

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Flip the 49th! Neighbors in Action

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 09 / 13 / 2018	
Mailing Address 366 Summer Street		FEC Identification Number C [REDACTED] Transaction ID : EXPB1017 Amount of Each Disbursement this Period [REDACTED] 12.06	
City Somerville	State MA	Zip Code 02144	Category/ Type [REDACTED]
Purpose of Disbursement Processing Fee		Candidate Name	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:			

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 09 / 21 / 2018	
Mailing Address 366 Summer Street		FEC Identification Number C [REDACTED] Transaction ID : EXPB1037 Amount of Each Disbursement this Period [REDACTED] 74.08	
City Somerville	State MA	Zip Code 02144	Category/ Type [REDACTED]
Purpose of Disbursement Processing Fee		Candidate Name	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:			

Full Name (Last, First, Middle Initial) C. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 09 / 29 / 2018	
Mailing Address 366 Summer Street		FEC Identification Number C [REDACTED] Transaction ID : EXPB1051 Amount of Each Disbursement this Period [REDACTED] 126.69	
City Somerville	State MA	Zip Code 02144	Category/ Type [REDACTED]
Purpose of Disbursement Processing Fee		Candidate Name	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 212.83
TOTAL This Period (last page this line number only).....▶	[REDACTED]

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : EXPB1017

Non-Contribution Account

Form/Schedule: SB29

Transaction ID: EXPB1037

Non-Contribution Account

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : EXPB1051

Non-Contribution Account

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Flip the 49th! Neighbors in Action

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

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144

Purpose of Disbursement Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 30 / 2018

FEC Identification Number: C

Transaction ID : **EXPB1118**

Amount of Each Disbursement this Period: 51.17

Memo Item

Full Name (Last, First, Middle Initial)
B. Bank of America

Mailing Address PO Box 15019

City Wilmington State DE Zip Code 19886

Purpose of Disbursement Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
07 / 21 / 2018

FEC Identification Number: C

Transaction ID : **EXPB889**

Amount of Each Disbursement this Period: 1099.42

Memo Item

Full Name (Last, First, Middle Initial)
C. Hotwire.com

Mailing Address 655 Montgomery Street, Suite 600

City San Francisco State CA Zip Code 94111

Purpose of Disbursement Travel Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
07 / 21 / 2018

FEC Identification Number: C

Transaction ID : **EDTB96EXPI**

Amount of Each Disbursement this Period: 88.89

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1150.59

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

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

Form/Schedule: SB29

Transaction ID : EXPB1118

Non-Contribution Account

Form/Schedule: SB29

Transaction ID: EXPB889

Non-Contribution Account

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Flip the 49th! Neighbors in Action

Full Name (Last, First, Middle Initial)

A. Lyft

Mailing Address 185 Berry Street

City San Francisco State CA Zip Code 94107

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 21 / 2018

FEC Identification Number

C []
Transaction ID : EDTB97EXPE
Amount of Each Disbursement this Period
[] 93.91

Memo Item

Full Name (Last, First, Middle Initial)

B. Southwest Airlines

Mailing Address 2702 Love Field Drive

City Dallas State TX Zip Code 75235

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 21 / 2018

FEC Identification Number

C []
Transaction ID : EDTB94EXPE
Amount of Each Disbursement this Period
[] 451.94

Memo Item

Full Name (Last, First, Middle Initial)

C. Thrifty Car Rental

Mailing Address 3355 Admiral Boland Way

City San Diego State CA Zip Code 92101

Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 21 / 2018

FEC Identification Number

C []
Transaction ID : EDTB95EXPI
Amount of Each Disbursement this Period
[] 353.33

Memo Item

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

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

[] 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)

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

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NAME OF COMMITTEE (In Full)
Flip the 49th! Neighbors in Action

A. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 1455 Market Street, #400

City San Francisco State CA Zip Code 94103

Purpose of Disbursement Travel Expenses

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 21 / 2018

FEC Identification Number: C

Transaction ID : EDTB98EXPE

Amount of Each Disbursement this Period: 111.35

Memo Item

B. Bank of America

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 15019

City Wilmington State DE Zip Code 19886

Purpose of Disbursement Webhosting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 21 / 2018

FEC Identification Number: C

Transaction ID : EXPB890

Amount of Each Disbursement this Period: 118.33

Memo Item

C. Google Apps for Work

Full Name (Last, First, Middle Initial)

Mailing Address 1600 Ampitheatre Parkway

City Mountain View State CA Zip Code 94043

Purpose of Disbursement Webhosting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 21 / 2018

FEC Identification Number: C

Transaction ID : EDTB93EXPI

Amount of Each Disbursement this Period: 75.33

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 118.33

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : EXPB890

Non-Contribution Account

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Flip the 49th! Neighbors in Action

A. Bank of America

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 15019

City Wilmington State DE Zip Code 19886

Purpose of Disbursement Meeting Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 07 / 21 / 2018

FEC Identification Number: C

Transaction ID : EXPB888

Amount of Each Disbursement this Period: 157.30

Memo Item

B. Bank of America

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 15019

City Wilmington State DE Zip Code 19886

Purpose of Disbursement Utilities

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 07 / 21 / 2018

FEC Identification Number: C

Transaction ID : EXPB891

Amount of Each Disbursement this Period: 64.98

Memo Item

C. Time Warner Cable

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 60074

City City Of Industry State CA Zip Code 91716

Purpose of Disbursement Utilities

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 07 / 21 / 2018

FEC Identification Number: C

Transaction ID : EDTB92EXPI

Amount of Each Disbursement this Period: 64.98

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 222.28

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

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

Form/Schedule: SB29

Transaction ID : EXPB888

Non-Contribution Account

Form/Schedule: SB29

Transaction ID: EXPB891

Non-Contribution Account

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Flip the 49th! Neighbors in Action

Full Name (Last, First, Middle Initial)
A. Bank of America

Mailing Address PO Box 15019

City Wilmington State DE Zip Code 19886

Purpose of Disbursement Webhosting & Newsletter Service

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
08 / 20 / 2018

FEC Identification Number: C

Transaction ID : **EXPB912**

Amount of Each Disbursement this Period: 364.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Google Apps for Work

Mailing Address 1600 Ampitheatre Parkway

City Mountain View State CA Zip Code 94043

Purpose of Disbursement Webhosting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
08 / 20 / 2018

FEC Identification Number: C

Transaction ID : **EDTB99EXPE**

Amount of Each Disbursement this Period: 65.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Squarespace, Inc.

Mailing Address 8 Clarkson Street

City New York State NY Zip Code 10014

Purpose of Disbursement Newsletter Service

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
08 / 20 / 2018

FEC Identification Number: C

Transaction ID : **EDTB100EXI**

Amount of Each Disbursement this Period: 247.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 364.00

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : EXPB912

Non-Contribution Account

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Flip the 49th! Neighbors in Action

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address PO Box 15019

City Wilmington State DE Zip Code 19886

Purpose of Disbursement
Travel Expenses

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
08 / 20 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : EXPB911
Amount of Each Disbursement this Period

[REDACTED] 191.21

Memo Item

Full Name (Last, First, Middle Initial)

B. Lyft

Mailing Address 185 Berry Street

City San Francisco State CA Zip Code 94107

Purpose of Disbursement
Travel Expenses

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
08 / 20 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : EDTB102EXP
Amount of Each Disbursement this Period

[REDACTED] 78.16

Memo Item

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 1455 Market Street, #400

City San Francisco State CA Zip Code 94103

Purpose of Disbursement
Travel Expenses

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
08 / 20 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : EDTB101EXI
Amount of Each Disbursement this Period

[REDACTED] 5.00

Memo Item

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

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

[REDACTED] 191.21

[REDACTED]

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : EXPB911

Non-Contribution Account

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Flip the 49th! Neighbors in Action

Full Name (Last, First, Middle Initial) A. Bank of America		Date of Disbursement MM / DD / YYYY 08 / 20 / 2018	
Mailing Address PO Box 15019		FEC Identification Number C [] Transaction ID : EXPB913 Amount of Each Disbursement this Period [] 43.58	
City Wilmington	State DE	Zip Code 19886	Category/ Type []
Purpose of Disbursement Meeting Expenses		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. Bank of America		Date of Disbursement MM / DD / YYYY 09 / 18 / 2018	
Mailing Address PO Box 15019		FEC Identification Number C [] Transaction ID : EXPB1032 Amount of Each Disbursement this Period [] 64.98	
City Wilmington	State DE	Zip Code 19886	Category/ Type []
Purpose of Disbursement Utilities		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. Time Warner Cable		Date of Disbursement MM / DD / YYYY 09 / 18 / 2018	
Mailing Address PO Box 60074		FEC Identification Number C [] Transaction ID : EDTB141EXI Amount of Each Disbursement this Period [] 64.98	
City City Of Industry	State CA	Zip Code 91716	Category/ Type []
Purpose of Disbursement Utilities		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input checked="" type="checkbox"/>
State: District:			

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

[] 108.56

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

[]

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : EXPB913

Non-Contribution Account

Form/Schedule: SB29

Transaction ID: EXPB1032

Non-Contribution Account

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Flip the 49th! Neighbors in Action

Full Name (Last, First, Middle Initial) A. Bank of America		Date of Disbursement MM / DD / YYYY 09 / 18 / 2018	
Mailing Address PO Box 15019		FEC Identification Number C [REDACTED] Transaction ID : EXPB1029 Amount of Each Disbursement this Period [REDACTED] 171.16	
City Wilmington	State DE	Zip Code 19886	Category/ Type [REDACTED]
Purpose of Disbursement Travel Expenses		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. Southwest Airlines		Date of Disbursement MM / DD / YYYY 09 / 18 / 2018	
Mailing Address 2702 Love Field Drive		FEC Identification Number C [REDACTED] Transaction ID : EDTB144EXP Amount of Each Disbursement this Period [REDACTED] 5.60	
City Dallas	State TX	Zip Code 75235	Category/ Type [REDACTED]
Purpose of Disbursement Travel Expenses		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input checked="" type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. Uber		Date of Disbursement MM / DD / YYYY 09 / 18 / 2018	
Mailing Address 1455 Market Street, #400		FEC Identification Number C [REDACTED] Transaction ID : EDTB145EXI Amount of Each Disbursement this Period [REDACTED] 165.56	
City San Francisco	State CA	Zip Code 94103	Category/ Type [REDACTED]
Purpose of Disbursement Travel Expenses		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input checked="" type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 171.16
TOTAL This Period (last page this line number only).....▶	[REDACTED]

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : EXPB1029

Non-Contribution Account

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Flip the 49th! Neighbors in Action

Full Name (Last, First, Middle Initial) A. Bank of America		Date of Disbursement MM / DD / YYYY 09 / 18 / 2018
Mailing Address PO Box 15019		FEC Identification Number C [REDACTED] Transaction ID : EXPB1030 Amount of Each Disbursement this Period [REDACTED] 41.71
City Wilmington	State DE	Zip Code 19886
Purpose of Disbursement Meeting Expenses		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Bank of America		Date of Disbursement MM / DD / YYYY 09 / 18 / 2018
Mailing Address PO Box 15019		FEC Identification Number C [REDACTED] Transaction ID : EXPB1031 Amount of Each Disbursement this Period [REDACTED] 108.00
City Wilmington	State DE	Zip Code 19886
Purpose of Disbursement Webhosting		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Google Apps for Work		Date of Disbursement MM / DD / YYYY 09 / 18 / 2018
Mailing Address 1600 Ampitheatre Parkway		FEC Identification Number C [REDACTED] Transaction ID : EDTB143EXI Amount of Each Disbursement this Period [REDACTED] 65.00
City Mountain View	State CA	Zip Code 94043
Purpose of Disbursement Webhosting		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 149.71
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

Form/Schedule: SB29

Transaction ID : EXPB1030

Non-Contribution Account

Form/Schedule: SB29

Transaction ID: EXPB1031

Non-Contribution Account

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Flip the 49th! Neighbors in Action

Full Name (Last, First, Middle Initial) A. Squarespace, Inc.		Date of Disbursement MM / DD / YYYY 09 / 18 / 2018	
Mailing Address 8 Clarkson Street		FEC Identification Number C [REDACTED] Transaction ID : EDTB142EXP Amount of Each Disbursement this Period [REDACTED] 31.00	
City New York	State NY	Zip Code 10014	Category/ Type [REDACTED]
Purpose of Disbursement Webhosting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input checked="" type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. Digital Impact		Date of Disbursement MM / DD / YYYY 07 / 16 / 2018	
Mailing Address 3060 University Avenue		FEC Identification Number C [REDACTED] Transaction ID : EXPB873 Amount of Each Disbursement this Period [REDACTED] 1200.00	
City San Diego	State CA	Zip Code 92104	Category/ Type [REDACTED]
Purpose of Disbursement Web Hosting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. Digital Impact		Date of Disbursement MM / DD / YYYY 08 / 13 / 2018	
Mailing Address 3060 University Avenue		FEC Identification Number C [REDACTED] Transaction ID : EXPB906 Amount of Each Disbursement this Period [REDACTED] 1146.40	
City San Diego	State CA	Zip Code 92104	Category/ Type [REDACTED]
Purpose of Disbursement Web Hosting & Ads		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 2346.40
TOTAL This Period (last page this line number only).....▶	[REDACTED]

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : EXPB873

Non-Contribution Account

Form/Schedule: SB29

Transaction ID: EXPB906

Non-Contribution Account

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Flip the 49th! Neighbors in Action

Full Name (Last, First, Middle Initial)

A. Digital Impact

Mailing Address 3060 University Avenue

City San Diego State CA Zip Code 92104

Purpose of Disbursement
Web Hosting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 07 / 2018

FEC Identification Number

C []

Transaction ID : EXPB981

Amount of Each Disbursement this Period

[] 613.64

Memo Item

Full Name (Last, First, Middle Initial)

B. Hustle, Inc.

Mailing Address 251 Kearny Street, #300

City San Francisco State CA Zip Code 94108

Purpose of Disbursement
Voter Outreach & Registration Campaign (no express advocacy)

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 16 / 2018

FEC Identification Number

C []

Transaction ID : EXPB876

Amount of Each Disbursement this Period

[] 3552.90

Memo Item

Full Name (Last, First, Middle Initial)

C. Kotoff Family Trust dba Pacifica Business Center

Mailing Address 5414 Oberlin Drive, Suite 140

City San Diego State CA Zip Code 92121

Purpose of Disbursement
Office Rent

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 26 / 2018

FEC Identification Number

C []

Transaction ID : EXPB892

Amount of Each Disbursement this Period

[] 2000.00

Memo Item

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

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

[] 6166.54

[]

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : EXPB981

Non-Contribution Account

Form/Schedule: SB29

Transaction ID: EXPB876

Non-Contribution Account

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : EXPB892

Non-Contribution Account

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Flip the 49th! Neighbors in Action

Full Name (Last, First, Middle Initial)

A. Kotoff Family Trust dba Pacifica Business Center

Mailing Address 5414 Oberlin Drive, Suite 140

City San Diego State CA Zip Code 92121

Purpose of Disbursement
Office Rent

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 20 / 2018

FEC Identification Number

C []

Transaction ID : EXPB920

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Kotoff Family Trust dba Pacifica Business Center

Mailing Address 5414 Oberlin Drive, Suite 140

City San Diego State CA Zip Code 92121

Purpose of Disbursement
Office Rent

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify)

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 21 / 2018

FEC Identification Number

C []

Transaction ID : EXPB1034

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Lawson-Remer dba Catalyst, Terra

Mailing Address 130 3rd Street

City Encinitas State CA Zip Code 92024

Purpose of Disbursement
Strategic Planning

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 10 / 2018

FEC Identification Number

C []

Transaction ID : EXPB1006

Amount of Each Disbursement this Period

10000.00

Memo Item

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

14000.00

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

[]

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : EXPB920

Non-Contribution Account

Form/Schedule: SB29

Transaction ID: EXPB1034

Non-Contribution Account

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : EXPB1006

Non-Contribution Account

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Flip the 49th! Neighbors in Action

Full Name (Last, First, Middle Initial) A. Lawson-Remer dba Catalyt, Terra		Date of Disbursement MM / DD / YYYY 09 / 15 / 2018
Mailing Address 130 3rd Street		FEC Identification Number C [REDACTED] Transaction ID : EXPB1010 Amount of Each Disbursement this Period [REDACTED] - 9375.00
City Encinitas	State CA	Zip Code 92024
Purpose of Disbursement Offset for independent expenditure paid in prior period; disseminated in current period		<input type="checkbox"/> 24E Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Lawson-Remer dba Catalyt, Terra		Date of Disbursement MM / DD / YYYY 09 / 15 / 2018
Mailing Address 130 3rd Street		FEC Identification Number C [REDACTED] Transaction ID : EXPB1009 Amount of Each Disbursement this Period [REDACTED] - 3125.00
City Encinitas	State CA	Zip Code 92024
Purpose of Disbursement Offset for independent expenditure paid in prior period; disseminated in current period		<input type="checkbox"/> 24A Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Olson Hagel & Fishburn, LLP		Date of Disbursement MM / DD / YYYY 07 / 16 / 2018
Mailing Address 555 Capitol Mall, Suite 400		FEC Identification Number C [REDACTED] Transaction ID : EXPB872 Amount of Each Disbursement this Period [REDACTED] 1227.02
City Sacramento	State CA	Zip Code 95814
Purpose of Disbursement Legal & Reporting Services		<input type="checkbox"/> [REDACTED] Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] - 11272.98
TOTAL This Period (last page this line number only).....▶	[REDACTED]

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : EXPB1010

Non-Contribution Account

Form/Schedule: SB29

Transaction ID: EXPB1009

Non-Contribution Account

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : EXPB872

Non-Contribution Account

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Flip the 49th! Neighbors in Action

Full Name (Last, First, Middle Initial)

A. Olson Hagel & Fishburn, LLP

Mailing Address 555 Capitol Mall, Suite 400

City Sacramento State CA Zip Code 95814

Purpose of Disbursement
Legal & Reporting Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 15 / 2018

FEC Identification Number

C

Transaction ID : EXPB907

Amount of Each Disbursement this Period

3049.45

Memo Item

Full Name (Last, First, Middle Initial)

B. Olson Hagel & Fishburn, LLP

Mailing Address 555 Capitol Mall, Suite 400

City Sacramento State CA Zip Code 95814

Purpose of Disbursement
Legal & Reporting Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 17 / 2018

FEC Identification Number

C

Transaction ID : EXPB1028

Amount of Each Disbursement this Period

2194.58

Memo Item

Full Name (Last, First, Middle Initial)

C. Rose Kapolczynski Consulting, Inc.

Mailing Address 969 Colorado Blvd., Suite 103

City Los Angeles State CA Zip Code 90041

Purpose of Disbursement
Campaign Buttons

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 17 / 2018

FEC Identification Number

C

Transaction ID : EXPB910

Amount of Each Disbursement this Period

510.00

Memo Item

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

5754.03

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : EXPB907

Non-Contribution Account

Form/Schedule: SB29

Transaction ID: EXPB1028

Non-Contribution Account

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : EXPB910

Non-Contribution Account

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Flip the 49th! Neighbors in Action

A. San Diego Gas & Electric

Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 25111

City Santa Ana State CA Zip Code 92799

Purpose of Disbursement Utilities

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 07 / 10 / 2018

FEC Identification Number: C

Transaction ID : EXPB852

Amount of Each Disbursement this Period: 210.19

Memo Item

B. San Diego Gas & Electric

Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 25111

City Santa Ana State CA Zip Code 92799

Purpose of Disbursement Utilities

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 07 / 18 / 2018

FEC Identification Number: C

Transaction ID : EXPB884

Amount of Each Disbursement this Period: 257.32

Memo Item

C. San Diego Gas & Electric

Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 25111

City Santa Ana State CA Zip Code 92799

Purpose of Disbursement Utilities

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 16 / 2018

FEC Identification Number: C

Transaction ID : EXPB908

Amount of Each Disbursement this Period: 492.33

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 959.84

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : EXPB852

Non-Contribution Account

Form/Schedule: SB29

Transaction ID: EXPB884

Non-Contribution Account

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : EXPB908

Non-Contribution Account

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Flip the 49th! Neighbors in Action

Full Name (Last, First, Middle Initial) A. San Diego Gas & Electric		Date of Disbursement MM / DD / YYYY 09 / 14 / 2018
Mailing Address P.O. Box 25111		FEC Identification Number C [REDACTED] Transaction ID : EXPB1018 Amount of Each Disbursement this Period [REDACTED] 403.35
City Santa Ana	State CA	Zip Code 92799
Purpose of Disbursement Utilities		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. San Diego Unified School District		Date of Disbursement MM / DD / YYYY 09 / 28 / 2018
Mailing Address 4860 Ruffner Street, Annex 14		FEC Identification Number C [REDACTED] Transaction ID : EXPB1048 Amount of Each Disbursement this Period [REDACTED] 426.38
City San Diego	State CA	Zip Code 92111
Purpose of Disbursement Meeting Space for Canvassing; Payment made in current period & disseminated in subsequent period		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. San Diego Unified School District		Date of Disbursement MM / DD / YYYY 09 / 28 / 2018
Mailing Address 4860 Ruffner Street, Annex 14		FEC Identification Number C [REDACTED] Transaction ID : EXPB1103 Amount of Each Disbursement this Period [REDACTED] 142.12
City San Diego	State CA	Zip Code 92111
Purpose of Disbursement Meeting Space for Canvassing; Payment made in current period & disseminated in subsequent period		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 971.85
TOTAL This Period (last page this line number only).....▶	[REDACTED]

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : EXPB1018

Non-Contribution Account

Form/Schedule: SB29

Transaction ID: EXPB1048

Non-Contribution Account

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : EXPB1103

Non-Contribution Account

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Flip the 49th! Neighbors in Action

Full Name (Last, First, Middle Initial) A. Service Employees International Union Local 221		Date of Disbursement MM / DD / YYYY 07 / 01 / 2018
Mailing Address 4004 Kearny Mesa Road		FEC Identification Number C [] Transaction ID : EXPB965 Amount of Each Disbursement this Period [] 1223.30
City San Diego	State CA	Zip Code 92111
Purpose of Disbursement Salary 7/1-7/7; In-kind		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Service Employees International Union Local 221		Date of Disbursement MM / DD / YYYY 07 / 08 / 2018
Mailing Address 4004 Kearny Mesa Road		FEC Identification Number C [] Transaction ID : EXPB964 Amount of Each Disbursement this Period [] 2446.60
City San Diego	State CA	Zip Code 92111
Purpose of Disbursement Salary 7/8-7/21; In-kind		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Service Employees International Union Local 221		Date of Disbursement MM / DD / YYYY 07 / 22 / 2018
Mailing Address 4004 Kearny Mesa Road		FEC Identification Number C [] Transaction ID : EXPB963 Amount of Each Disbursement this Period [] 2446.60
City San Diego	State CA	Zip Code 92111
Purpose of Disbursement Salary 7/22-8/4; In-kind		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 6116.50
TOTAL This Period (last page this line number only).....▶	[]

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : EXPB965

Non-Contribution Account

Form/Schedule: SB29

Transaction ID: EXPB964

Non-Contribution Account

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : EXPB963

Non-Contribution Account

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Flip the 49th! Neighbors in Action

Full Name (Last, First, Middle Initial) A. Service Employees International Union Local 221		Date of Disbursement MM / DD / YYYY 08 / 05 / 2018
Mailing Address 4004 Kearny Mesa Road		FEC Identification Number C [] Transaction ID : EXPB962 Amount of Each Disbursement this Period [] 2446.60
City San Diego	State CA	Zip Code 92111
Purpose of Disbursement Salary 8/5-8/18; In-kind		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Service Employees International Union Local 221		Date of Disbursement MM / DD / YYYY 08 / 21 / 2018
Mailing Address 4004 Kearny Mesa Road		FEC Identification Number C [] Transaction ID : EXPB924 Amount of Each Disbursement this Period [] 4928.46
City San Diego	State CA	Zip Code 92111
Purpose of Disbursement Salary 7/22-8/4		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Service Employees International Union Local 221		Date of Disbursement MM / DD / YYYY 08 / 21 / 2018
Mailing Address 4004 Kearny Mesa Road		FEC Identification Number C [] Transaction ID : EXPB923 Amount of Each Disbursement this Period [] 4928.46
City San Diego	State CA	Zip Code 92111
Purpose of Disbursement Salary 7/8-7/21		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 12303.52
TOTAL This Period (last page this line number only).....▶	[]

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : EXPB962

Non-Contribution Account

Form/Schedule: SB29

Transaction ID: EXPB924

Non-Contribution Account

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : EXPB923

Non-contribution account.

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Flip the 49th! Neighbors in Action

Full Name (Last, First, Middle Initial) A. Service Employees International Union Local 221		Date of Disbursement MM / DD / YYYY 08 / 21 / 2018
Mailing Address 4004 Kearny Mesa Road		FEC Identification Number C [] Transaction ID : EXPB944
City San Diego	State CA	Zip Code 92111
Purpose of Disbursement Salary 6/6-6/23		Amount of Each Disbursement this Period [] 6407.10
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Service Employees International Union Local 221		Date of Disbursement MM / DD / YYYY 08 / 24 / 2018
Mailing Address 4004 Kearny Mesa Road		FEC Identification Number C [] Transaction ID : EXPB925
City San Diego	State CA	Zip Code 92111
Purpose of Disbursement Salary 8/5-8/18		Amount of Each Disbursement this Period [] 5342.76
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Service Employees International Union Local 221		Date of Disbursement MM / DD / YYYY 08 / 29 / 2018
Mailing Address 4004 Kearny Mesa Road		FEC Identification Number C [] Transaction ID : EXPB939
City San Diego	State CA	Zip Code 92111
Purpose of Disbursement Salary 8/5-8/18		Amount of Each Disbursement this Period [] 850.00
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

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

12599.86

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : EXPB944

Non-Contribution Account

Form/Schedule: SB29

Transaction ID: EXPB925

Non-Contribution Account.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : EXPB939

Non-Contribution Account.

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Flip the 49th! Neighbors in Action

Full Name (Last, First, Middle Initial) A. Service Employees International Union Local 221		Date of Disbursement MM / DD / YYYY 08 / 31 / 2018
Mailing Address 4004 Kearny Mesa Road		FEC Identification Number C Transaction ID : EXPB951 Amount of Each Disbursement this Period 2653.77
City San Diego	State CA	
Zip Code 92111	Purpose of Disbursement Salary 6/24-6/30	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Service Employees International Union Local 221		Date of Disbursement MM / DD / YYYY 08 / 31 / 2018
Mailing Address 4004 Kearny Mesa Road		FEC Identification Number C Transaction ID : EXPB949 Amount of Each Disbursement this Period 1082.98
City San Diego	State CA	
Zip Code 92111	Purpose of Disbursement Salary 5/18-5/24	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Service Employees International Union Local 221		Date of Disbursement MM / DD / YYYY 08 / 31 / 2018
Mailing Address 4004 Kearny Mesa Road		FEC Identification Number C Transaction ID : EXPB953 Amount of Each Disbursement this Period 2274.69
City San Diego	State CA	
Zip Code 92111	Purpose of Disbursement Salary 7/1-7/7	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	6011.44
TOTAL This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : EXPB951

Non-Contribution Account

Form/Schedule: SB29

Transaction ID: EXPB949

Non-Contribution Account

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : EXPB953

Non-Contribution Account

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Flip the 49th! Neighbors in Action

Full Name (Last, First, Middle Initial) A. Service Employees International Union Local 221		Date of Disbursement MM / DD / YYYY 09 / 07 / 2018
Mailing Address 4004 Kearny Mesa Road		FEC Identification Number C [] Transaction ID : EXPB979 Amount of Each Disbursement this Period [] 9055.61
City San Diego	State CA	Zip Code 92111
Purpose of Disbursement Salary 8/5-8/24		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Service Employees International Union Local 221		Date of Disbursement MM / DD / YYYY 09 / 18 / 2018
Mailing Address 4004 Kearny Mesa Road		FEC Identification Number C [] Transaction ID : EXPB1033 Amount of Each Disbursement this Period [] 21948.60
City San Diego	State CA	Zip Code 92111
Purpose of Disbursement Staff Time 10/1-10/26; Payment made in current period & disseminated in subsequent period		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Sunshine Elite Cleaning, Inc.		Date of Disbursement MM / DD / YYYY 07 / 05 / 2018
Mailing Address 5145 Avenida Encinas, Suite J		FEC Identification Number C [] Transaction ID : EXPB842 Amount of Each Disbursement this Period [] 60.00
City Carlsbad	State CA	Zip Code 92008
Purpose of Disbursement Cleaning Services		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 31064.21
TOTAL This Period (last page this line number only).....▶	[]

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : EXPB979

Non-Contribution Account

Form/Schedule: SB29

Transaction ID: EXPB1033

Non-Contribution Account

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : EXPB842

Non-Contribution Account

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Flip the 49th! Neighbors in Action

Full Name (Last, First, Middle Initial) A. Sunshine Elite Cleaning, Inc.		Date of Disbursement MM / DD / YYYY 07 / 18 / 2018	
Mailing Address 5145 Avenida Encinas, Suite J		FEC Identification Number C [REDACTED] Transaction ID : EXPB885 Amount of Each Disbursement this Period [REDACTED] 60.00	
City Carlsbad	State CA	Zip Code 92008	Category/ Type [REDACTED]
Purpose of Disbursement Cleaning Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. Sunshine Elite Cleaning, Inc.		Date of Disbursement MM / DD / YYYY 08 / 10 / 2018	
Mailing Address 5145 Avenida Encinas, Suite J		FEC Identification Number C [REDACTED] Transaction ID : EXPB905 Amount of Each Disbursement this Period [REDACTED] 240.00	
City Carlsbad	State CA	Zip Code 92008	Category/ Type [REDACTED]
Purpose of Disbursement Cleaning Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. Sunshine Elite Cleaning, Inc.		Date of Disbursement MM / DD / YYYY 08 / 31 / 2018	
Mailing Address 5145 Avenida Encinas, Suite J		FEC Identification Number C [REDACTED] Transaction ID : EXPB955 Amount of Each Disbursement this Period [REDACTED] 60.00	
City Carlsbad	State CA	Zip Code 92008	Category/ Type [REDACTED]
Purpose of Disbursement Cleaning Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 360.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

Form/Schedule: SB29

Transaction ID : EXPB885

Non-Contribution Account

Form/Schedule: SB29

Transaction ID: EXPB905

Non-Contribution Account

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : EXPB955

Non-Contribution Account

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Flip the 49th! Neighbors in Action

Full Name (Last, First, Middle Initial)

A. Sunshine Elite Cleaning, Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	06	/	2018

Mailing Address 5145 Avenida Encinas, Suite J

FEC Identification Number

C

Transaction ID : EXPB969
Amount of Each Disbursement this Period

60.00

Memo Item

City Carlsbad State CA Zip Code 92008

Purpose of Disbursement
Cleaning Services

Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. Sunshine Elite Cleaning, Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	14	/	2018

Mailing Address 5145 Avenida Encinas, Suite J

FEC Identification Number

C

Transaction ID : EXPB1019
Amount of Each Disbursement this Period

60.00

Memo Item

City Carlsbad State CA Zip Code 92008

Purpose of Disbursement
Cleaning Services

Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. Vista Unified School District

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	05	/	2018

Mailing Address 1234 Arcadia Avenue

FEC Identification Number

C

Transaction ID : EXPB843
Amount of Each Disbursement this Period

155.50

Memo Item

City Vista State CA Zip Code 92084

Purpose of Disbursement
Meeting Space

Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

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

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

275.50

90878.47

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

Form/Schedule: SB29

Transaction ID : EXPB969

Non-Contribution Account

Form/Schedule: SB29

Transaction ID: EXPB1019

Non-Contribution Account

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : EXPB843

Non-Contribution Account

Form/Schedule:

Transaction ID:

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 121 OF 171
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Flip the 49th! Neighbors in Action

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Digital Impact			Nature of Debt (Purpose): Web Hosting
Mailing Address 3060 University Avenue			
City San Diego	State CA	Zip Code 92104	

Outstanding Balance Beginning This Period 1200.00	Transaction ID : PAYD871	
Amount Incurred This Period 0.00	Payment This Period 1200.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Hustle, Inc.			Nature of Debt (Purpose): Voter Outreach & Registration Campaign (no express advocacy)
Mailing Address 251 Kearny Street, #300			
City San Francisco	State CA	Zip Code 94108	

Outstanding Balance Beginning This Period 472.20	Transaction ID : PAYD681	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 472.20

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Hustle, Inc.			Nature of Debt (Purpose): Voter Outreach & Registration Campaign (no express advocacy)
Mailing Address 251 Kearny Street, #300			
City San Francisco	State CA	Zip Code 94108	

Outstanding Balance Beginning This Period 472.20	Transaction ID : PAYD725	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 472.20

1) SUBTOTALS This Period This Page (optional)..... ▶	944.40
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) ▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SD10

Transaction ID : PAYD871

Non-Contribution Account

Form/Schedule: SD10

Transaction ID: PAYD681

Non-Contribution Account

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SD10

Transaction ID : PAYD725

Non-Contribution Account

Form/Schedule:

Transaction ID:

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 124 OF 171
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Flip the 49th! Neighbors in Action

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Hustle, Inc.			Nature of Debt (Purpose): Voter Outreach & Registration Campaign (no express advocacy)
Mailing Address 251 Kearny Street, #300			
City San Francisco	State CA	Zip Code 94108	

Outstanding Balance Beginning This Period 393.50	Transaction ID : PAYD728	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 393.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Hustle, Inc.			Nature of Debt (Purpose): Text Messaging Campaign
Mailing Address 251 Kearny Street, #300			
City San Francisco	State CA	Zip Code 94108	

Outstanding Balance Beginning This Period 78.70	Transaction ID : PAYD729	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 78.70

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Hustle, Inc.			Nature of Debt (Purpose): Voter Outreach & Registration Campaign (no express advocacy)
Mailing Address 251 Kearny Street, #300			
City San Francisco	State CA	Zip Code 94108	

Outstanding Balance Beginning This Period 472.20	Transaction ID : PAYD866	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 472.20

1) SUBTOTALS This Period This Page (optional)..... ▶	944.40
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) ▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SD10

Transaction ID : PAYD728

Non-Contribution Account

Form/Schedule: SD10

Transaction ID: PAYD729

Non-Contribution Account

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SD10

Transaction ID : PAYD866

Non-Contribution Account

Form/Schedule:

Transaction ID:

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 127 OF 171
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Flip the 49th! Neighbors in Action

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Hustle, Inc.			Nature of Debt (Purpose): Voter Outreach & Registration Campaign (no express advocacy)
Mailing Address 251 Kearny Street, #300			
City San Francisco	State CA	Zip Code 94108	

Outstanding Balance Beginning This Period 3552.90	Transaction ID : PAYD875	
Amount Incurred This Period 0.00	Payment This Period 3552.90	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Hustle, Inc.			Nature of Debt (Purpose): Voter Outreach & Registration Campaign (no express advocacy)
Mailing Address 251 Kearny Street, #300			
City San Francisco	State CA	Zip Code 94108	

Outstanding Balance Beginning This Period 0.00	Transaction ID : PAYD1099	
Amount Incurred This Period 2653.65	Payment This Period 0.00	Outstanding Balance at Close of This Period 2653.65

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Hustle, Inc.			Nature of Debt (Purpose): Voter Outreach & Registration Campaign (no express advocacy)
Mailing Address 251 Kearny Street, #300			
City San Francisco	State CA	Zip Code 94108	

Outstanding Balance Beginning This Period 0.00	Transaction ID : PAYD1153	
Amount Incurred This Period 6396.90	Payment This Period 0.00	Outstanding Balance at Close of This Period 6396.90

1) SUBTOTALS This Period This Page (optional)..... ▶	9050.55
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) ▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SD10

Transaction ID : PAYD875

Non-Contribution Account

Form/Schedule: SD10

Transaction ID: PAYD1099

Non-Contribution Account

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SD10

Transaction ID : PAYD1153

Non-Contribution Account

Form/Schedule:

Transaction ID:

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 130 OF 171
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Flip the 49th! Neighbors in Action

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Service Employees International Union Local 221			Nature of Debt (Purpose): Salary 5/25-6/5; Non-Contribution Account
Mailing Address 4004 Kearny Mesa Road			
City San Diego	State CA	Zip Code 92111	

Outstanding Balance Beginning This Period <input type="text" value="6479.92"/>	Transaction ID : PAYD747	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="6479.92"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Service Employees International Union Local 221			Nature of Debt (Purpose): Salary 5/18-5/24
Mailing Address 4004 Kearny Mesa Road			
City San Diego	State CA	Zip Code 92111	

Outstanding Balance Beginning This Period <input type="text" value="1082.98"/>	Transaction ID : PAYD846	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="1082.98"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Service Employees International Union Local 221			Nature of Debt (Purpose): Salary 6/6-6/23
Mailing Address 4004 Kearny Mesa Road			
City San Diego	State CA	Zip Code 92111	

Outstanding Balance Beginning This Period <input type="text" value="6407.10"/>	Transaction ID : PAYD943	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="6407.10"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SD10

Transaction ID : PAYD846

Non-Contribution Account

Form/Schedule: SD10

Transaction ID: PAYD943

Non-Contribution Account

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 132 OF 171
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Flip the 49th! Neighbors in Action

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Service Employees International Union Local 221		Nature of Debt (Purpose): Salary 6/24-6/30	
Mailing Address 4004 Kearny Mesa Road			
City San Diego	State CA	Zip Code 92111	

Outstanding Balance Beginning This Period 2653.77		Transaction ID : PAYD946	
Amount Incurred This Period 0.00	Payment This Period 2653.77	Outstanding Balance at Close of This Period 0.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Service Employees International Union Local 221		Nature of Debt (Purpose): Reimbursement for Food & Office Supplies	
Mailing Address 4004 Kearny Mesa Road			
City San Diego	State CA	Zip Code 92111	

Outstanding Balance Beginning This Period 2094.22		Transaction ID : PAYD1135	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2094.22	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Service Employees International Union Local 221		Nature of Debt (Purpose): Staff Time for Field Program 9/30	
Mailing Address 4004 Kearny Mesa Road			
City San Diego	State CA	Zip Code 92111	

Outstanding Balance Beginning This Period 0.00		Transaction ID : PAYD1085	
Amount Incurred This Period 1575.04	Payment This Period 0.00	Outstanding Balance at Close of This Period 1575.04	

1) SUBTOTALS This Period This Page (optional)..... ▶	3669.26
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) ▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SD10

Transaction ID : PAYD946

Non-Contribution Account

Form/Schedule: SD10

Transaction ID: PAYD1135

Non-Contribution Account

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SD10

Transaction ID : PAYD1085

Non-Contribution Account

Form/Schedule:

Transaction ID:

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 135 OF 171
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Flip the 49th! Neighbors in Action

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Service Employees International Union Local 221		Nature of Debt (Purpose): Staff Time for Field Program 9/30	
Mailing Address 4004 Kearny Mesa Road			
City San Diego	State CA	Zip Code 92111	

Outstanding Balance Beginning This Period 0.00		Transaction ID : PAYD1090	
Amount Incurred This Period 525.01	Payment This Period 0.00	Outstanding Balance at Close of This Period 525.01	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Service Employees International Union Local 221		Nature of Debt (Purpose): Reimbursement for Food & Office Supplies	
Mailing Address 4004 Kearny Mesa Road			
City San Diego	State CA	Zip Code 92111	

Outstanding Balance Beginning This Period 0.00		Transaction ID : PAYD1136	
Amount Incurred This Period 6652.95	Payment This Period 0.00	Outstanding Balance at Close of This Period 6652.95	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Service Employees International Union Local 221		Nature of Debt (Purpose): Reimbursement for Canvassing Expenses	
Mailing Address 4004 Kearny Mesa Road			
City San Diego	State CA	Zip Code 92111	

Outstanding Balance Beginning This Period 0.00		Transaction ID : PAYD1137	
Amount Incurred This Period 2562.71	Payment This Period 0.00	Outstanding Balance at Close of This Period 2562.71	

1) SUBTOTALS This Period This Page (optional)..... ▶	9740.67
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) ▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SD10

Transaction ID : PAYD1090

Non-Contribution Account

Form/Schedule: SD10

Transaction ID: PAYD1136

Non-Contribution Account

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SD10

Transaction ID : PAYD1137

Non-Contribution Account

Form/Schedule:

Transaction ID:

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 138 OF 171
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)
Flip the 49th! Neighbors in Action

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Service Employees International Union Local 221			Nature of Debt (Purpose): Reimbursement for Canvassing Expenses
Mailing Address 4004 Kearny Mesa Road			
City San Diego	State CA	Zip Code 92111	

Outstanding Balance Beginning This Period		Transaction ID : PAYD1138	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
854.23	0.00	854.23	

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)..... ▶	854.23
2) TOTALS This Period (last page this line number only)..... ▶	25203.51
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) ▶	25203.51

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SD10

Transaction ID : PAYD1138

Non-Contribution Account

Form/Schedule:

Transaction ID:

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Flip the 49th! Neighbors in Action	FEC IDENTIFICATION NUMBER ▼ C C00662312
--	--

Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee Memo Item
California State Council of Service Employees Political Committee

Date of Public Distribution/Dissemination
 / /
09 / 11 / 2018

Mailing Address 1130 K Street, Suite 300

Amount
 3769.80

City Sacramento	State CA	Zip Code 95814
--------------------	-------------	-------------------

Transaction ID : EDTEALC116
Date of Disbursement or Obligation

Purpose of Expenditure
Staff Time 9/11-9/30; In-kind

Category/Type 24E

/ /
09 / 11 / 2018

Name of Federal Candidate: Support Oppose
Levin, Mike, , ,

Office Sought: House President Senate
District: 49 State: CA

Calendar Year-To-Date Per Election for Office Sought 103916.35

Disbursement For: Primary General 2018
 Other (specify) ▶

Full Name of Payee Memo Item
California State Council of Service Employees Political Committee

Date of Public Distribution/Dissemination
 / /
09 / 11 / 2018

Mailing Address 1130 K Street, Suite 300

Amount
 1256.60

City Sacramento	State CA	Zip Code 95814
--------------------	-------------	-------------------

Transaction ID : EDTEALC117
Date of Disbursement or Obligation

Purpose of Expenditure
Staff Time 9/11-9/30; In-kind

Category/Type 24A

/ /
09 / 11 / 2018

Name of Federal Candidate: Support Oppose
Harkey, Diane, , ,

Office Sought: House President Senate
District: 49 State: CA

Calendar Year-To-Date Per Election for Office Sought 103916.35

Disbursement For: Primary General 2018
 Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	▶	<input type="text"/> 5026.40
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	<input type="text"/>
(c) TOTAL Independent Expenditures	▶	<input type="text"/>

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 Lawson-Remer, Terra, , , **[Electronically Filed]** Date / /
10 / 25 / 2018

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SE

Transaction ID : EDTEALC116

Non-Contribution Account

Form/Schedule: SE

Transaction ID: EDTEALC117

Non-Contribution Account

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Flip the 49th! Neighbors in Action
FEC IDENTIFICATION NUMBER
C C00662312

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
California State Council of Service Employees Political Committee

Date of Public Distribution/Dissemination
09 / 11 / 2018

Mailing Address
1130 K Street, Suite 300

Amount
203.67

City State Zip Code
Sacramento CA 95814

Transaction ID : EDTEALC118

Purpose of Expenditure
Campaign Mileage & Food 9/11-9/30; In-kind
Category/Type
24A

Date of Disbursement or Obligation
09 / 11 / 2018

Name of Federal Candidate:
Harkey, Diane, ,
Support Oppose

Office Sought:
House District: 49
President Senate State: CA

Calendar Year-To-Date
Per Election for Office Sought
103916.35

Disbursement For:
Primary General
2018 Other (specify)

Full Name of Payee
California State Council of Service Employees Political Committee

Date of Public Distribution/Dissemination
09 / 11 / 2018

Mailing Address
1130 K Street, Suite 300

Amount
611.00

City State Zip Code
Sacramento CA 95814

Transaction ID : EDTEALC119

Purpose of Expenditure
Campaign Mileage & Food 9/11-9/30; In-kind
Category/Type
24E

Date of Disbursement or Obligation
09 / 11 / 2018

Name of Federal Candidate:
Levin, Mike, ,
Support Oppose

Office Sought:
House District: 49
President Senate State: CA

Calendar Year-To-Date
Per Election for Office Sought
103916.35

Disbursement For:
Primary General
2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 814.67

(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.

Lawson-Remer, Terra, ,
Signature [Electronically Filed] Date 10 / 25 / 2018

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SE

Transaction ID : EDTEALC118

Non-Contribution Account

Form/Schedule: SE

Transaction ID: EDTEALC119

Non-Contribution Account

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Flip the 49th! Neighbors in Action
FEC IDENTIFICATION NUMBER C C00662312

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Futura Color, Inc.
Mailing Address 12150 Paine Place
City Poway State CA Zip Code 92064
Purpose of Expenditure Flyer Category/Type 24E
Name of Federal Candidate: Levin, Mike, , Support
Office Sought: House District: 49 State: CA
Calendar Year-To-Date Per Election for Office Sought 103916.35
Disbursement For: General 2018

Full Name of Payee Futura Color, Inc.
Mailing Address 12150 Paine Place
City Poway State CA Zip Code 92064
Purpose of Expenditure Flyer Category/Type 24A
Name of Federal Candidate: Harkey, Diane, , Oppose
Office Sought: House District: 49 State: CA
Calendar Year-To-Date Per Election for Office Sought 103916.35
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 905.10
(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.

Lawson-Remer, Terra, , [Electronically Filed] Date 10 / 25 / 2018
Signature

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SE

Transaction ID : EDTEALC105

Non-Contribution Account

Form/Schedule: SE

Transaction ID: EDTEALC106

Non-Contribution Account

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Flip the 49th! Neighbors in Action
FEC IDENTIFICATION NUMBER C C00662312

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Futura Color, Inc.
Mailing Address 12150 Paine Place
City Poway State CA Zip Code 92064
Purpose of Expenditure Flyer Category/Type 24E

Date of Public Distribution/Dissemination 08/30/2018
Amount 1035.48
Transaction ID: EDTEALC120
Date of Disbursement or Obligation 09/21/2018

Name of Federal Candidate: Levin, Mike, , ,
Support Oppose
Office Sought: House Senate State: CA
District: 49

Disbursement For: Primary General 2018
Other (specify)

Full Name of Payee Futura Color, Inc.
Mailing Address 12150 Paine Place
City Poway State CA Zip Code 92064
Purpose of Expenditure Flyer Category/Type 24A

Date of Public Distribution/Dissemination 08/30/2018
Amount 1035.48
Transaction ID: EDTEALC123
Date of Disbursement or Obligation 09/21/2018

Name of Federal Candidate: Harkey, Diane, , ,
Support Oppose
Office Sought: House Senate State: CA
District: 49

Disbursement For: Primary General 2018
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 2070.96
(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.

Lawson-Remer, Terra, , , [Electronically Filed] Date 10/25/2018
Signature

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SE

Transaction ID : EDTEALC120

Non-Contribution Account

Form/Schedule: SE

Transaction ID: EDTEALC123

Non-Contribution Account

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Flip the 49th! Neighbors in Action
FEC IDENTIFICATION NUMBER
C C00662312

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee Futura Color, Inc.
Mailing Address 12150 Paine Place
City Poway State CA Zip Code 92064
Purpose of Expenditure Flyer Category/Type 24E
Name of Federal Candidate: Levin, Mike, , , Support
Office Sought: House District: 49 State: CA
Calendar Year-To-Date Per Election for Office Sought 103916.35
Disbursement For: General 2018

Full Name of Payee Futura Color, Inc.
Mailing Address 12150 Paine Place
City Poway State CA Zip Code 92064
Purpose of Expenditure Flyer Category/Type 24A
Name of Federal Candidate: Harkey, Diane, , , Oppose
Office Sought: House District: 49 State: CA
Calendar Year-To-Date Per Election for Office Sought 103916.35
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 2396.36
(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.

Lawson-Remer, Terra, , , [Electronically Filed]
Signature Date 10 / 25 / 2018

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SE

Transaction ID : EDTEALC121

Non-Contribution Account

Form/Schedule: SE

Transaction ID: EDTEALC122

Non-Contribution Account

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Flip the 49th! Neighbors in Action
FEC IDENTIFICATION NUMBER C C00662312

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Lawson-Remer dba Catalyst, Terra
Mailing Address 130 3rd Street
City Encinitas State CA Zip Code 92024
Purpose of Expenditure Strategic Planning Category/Type 24E
Date of Public Distribution/Dissemination 09/15/2018
Amount 9375.00
Transaction ID: EDTEALC114
Date of Disbursement or Obligation 09/15/2018

Name of Federal Candidate: Levin, Mike, , , Support
Office Sought: House District: 49 State: CA
Disbursement For: General 2018

Full Name of Payee Lawson-Remer dba Catalyst, Terra
Mailing Address 130 3rd Street
City Encinitas State CA Zip Code 92024
Purpose of Expenditure Strategic Planning Category/Type 24A
Date of Public Distribution/Dissemination 09/15/2018
Amount 3125.00
Transaction ID: EDTEALC115
Date of Disbursement or Obligation 09/15/2018

Name of Federal Candidate: Harkey, Diane, , , Oppose
Office Sought: House District: 49 State: CA
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 12500.00
(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.

Lawson-Remer, Terra, , ,

[Electronically Filed]

Date 10/25/2018

Signature

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SE

Transaction ID : EDTEALC114

Non-Contribution Account

Form/Schedule: SE

Transaction ID: EDTEALC115

Non-Contribution Account

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Flip the 49th! Neighbors in Action
FEC IDENTIFICATION NUMBER C C00662312

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Rose Kapolczynski Consulting, Inc.
Mailing Address 969 Colorado Blvd., Suite 103
City Los Angeles State CA Zip Code 90041
Purpose of Expenditure Yard Signs Category/Type 24E
Date of Public Distribution/Dissemination 08/18/2018
Amount 5600.00
Transaction ID: EDTEALC107
Date of Disbursement or Obligation 08/17/2018

Name of Federal Candidate: Levin, Mike, , , Support
Office Sought: House District: 49 State: CA
Calendar Year-To-Date Per Election for Office Sought 103916.35
Disbursement For: General 2018

Full Name of Payee Rose Kapolczynski Consulting, Inc.
Mailing Address 969 Colorado Blvd., Suite 103
City Los Angeles State CA Zip Code 90041
Purpose of Expenditure Doorhangers Category/Type 24E
Date of Public Distribution/Dissemination 09/06/2018
Amount 15000.00
Transaction ID: EDTEALC104
Date of Disbursement or Obligation 08/31/2018

Name of Federal Candidate: Levin, Mike, , , Support
Office Sought: House District: 49 State: CA
Calendar Year-To-Date Per Election for Office Sought 103916.35
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 20600.00
(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.

Lawson-Remer, Terra, , ,

[Electronically Filed]

Date 10/25/2018

Signature

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SE

Transaction ID : EDTEALC107

Non-Contribution Account

Form/Schedule: SE

Transaction ID: EDTEALC104

Non-Contribution Account

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Flip the 49th! Neighbors in Action	FEC IDENTIFICATION NUMBER ▼ C C00662312
--	---

Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item Service Employees International Union Local 221	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 4004 Kearny Mesa Road	Amount <input type="text"/> 1619.98
City San Diego State CA Zip Code 92111	
Purpose of Expenditure Salary 5/25-6/5; Non-Contribution Account	Transaction ID : PDTE22
Category/Type <input type="text"/> 24E	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Kerr, Paul, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 49 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 66028.45	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item Service Employees International Union Local 221	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 4004 Kearny Mesa Road	Amount <input type="text"/> 1619.98
City San Diego State CA Zip Code 92111	
Purpose of Expenditure Salary 5/25-6/5; Non-Contribution Account	Transaction ID : PDTE23
Category/Type <input type="text"/> 24E	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Jacobs, Sara, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 49 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 66028.45	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 3239.96
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

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.

Lawson-Remer, Terra, , ,

[Electronically Filed]

Date / /

Signature

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SE

Transaction ID : PDTE22

Non-Contribution Account

Form/Schedule: SE

Transaction ID: PDTE23

Non-Contribution Account

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Flip the 49th! Neighbors in Action
FEC IDENTIFICATION NUMBER C C00662312

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Service Employees International Union Local 221
Mailing Address 4004 Kearny Mesa Road
City San Diego State CA Zip Code 92111
Purpose of Expenditure Salary 5/25-6/5; Non-Contribution Account
Category/Type 24E
Date of Public Distribution/Dissemination 05/26/2018
Amount 1619.98
Transaction ID : PDTE24
Date of Disbursement or Obligation 08/31/2018

Name of Federal Candidate: Levin, Mike, , , Support
Office Sought: House District: 49 State: CA
Calendar Year-To-Date Per Election for Office Sought 66028.45
Disbursement For: Primary 2018

Full Name of Payee Service Employees International Union Local 221
Mailing Address 4004 Kearny Mesa Road
City San Diego State CA Zip Code 92111
Purpose of Expenditure Salary 5/25-6/5; Non-Contribution Account
Category/Type 24E
Date of Public Distribution/Dissemination 05/26/2018
Amount 1619.98
Transaction ID : PDTE25
Date of Disbursement or Obligation 08/31/2018

Name of Federal Candidate: Applegate, Doug, , , Support
Office Sought: House District: 49 State: CA
Calendar Year-To-Date Per Election for Office Sought 66028.45
Disbursement For: Primary 2018

(a) SUBTOTAL of Itemized Independent Expenditures 3239.96
(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.

Lawson-Remer, Terra, , , [Electronically Filed] Date 10/25/2018
Signature

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`#19A-N5HCB

Form/Schedule: SE

Transaction ID : PDTE24

Non-Contribution Account

Form/Schedule: SE

Transaction ID: PDTE25

Non-Contribution Account

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Flip the 49th! Neighbors in Action	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00662312 </div>
--	---

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 <input type="checkbox"/> Memo Item Service Employees International Union Local 221			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">08 / 25 / 2018</div>		
Mailing Address 4004 Kearny Mesa Road			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">3483.25</div>		
City San Diego	State CA	Zip Code 92111			
Purpose of Expenditure Staff Time for Field Program 8/25-9/1		Category/Type 24A	Transaction ID : EDTEALC110 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">09 / 07 / 2018</div>		
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Harkey, Diane, , ,			Office Sought: <input checked="" type="checkbox"/> House District: <u>49</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>CA</u>		
Calendar Year-To-Date Per Election for Office Sought 103916.35			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <input type="checkbox"/> Memo Item Service Employees International Union Local 221			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">08 / 25 / 2018</div>		
Mailing Address 4004 Kearny Mesa Road			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">3483.26</div>		
City San Diego	State CA	Zip Code 92111			
Purpose of Expenditure Staff Time for Field Program 8/25-9/1		Category/Type 24E	Transaction ID : EDTEALC111 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">09 / 07 / 2018</div>		
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Levin, Mike, , ,			Office Sought: <input checked="" type="checkbox"/> House District: <u>49</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>CA</u>		
Calendar Year-To-Date Per Election for Office Sought 103916.35			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">6966.51</div>
(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

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.

Lawson-Remer, Terra, , ,

[Electronically Filed]

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

10 / 25 / 2018

Signature

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SE

Transaction ID : EDTEALC110

Non-Contribution Account

Form/Schedule: SE

Transaction ID: EDTEALC111

Non-Contribution Account

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Flip the 49th! Neighbors in Action
FEC IDENTIFICATION NUMBER C C00662312

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Service Employees International Union Local 221
Mailing Address 4004 Kearny Mesa Road
City San Diego State CA Zip Code 92111
Purpose of Expenditure Staff Time for Field Program 9/2-9/29
Category/Type 24E
Date of Public Distribution/Dissemination 09/02/2018
Amount 28538.55
Transaction ID : PDTE32
Date of Disbursement or Obligation 09/18/2018

Name of Federal Candidate: Levin, Mike, ,
Support Oppose
Office Sought: House Senate State: CA
District: 49
Calendar Year-To-Date Per Election for Office Sought 103916.35
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee Service Employees International Union Local 221
Mailing Address 4004 Kearny Mesa Road
City San Diego State CA Zip Code 92111
Purpose of Expenditure Staff Time for Field Program 9/2-9/29
Category/Type 24A
Date of Public Distribution/Dissemination 09/02/2018
Amount 9512.85
Transaction ID : PDTE33
Date of Disbursement or Obligation 09/18/2018

Name of Federal Candidate: Harkey, Diane, ,
Support Oppose
Office Sought: House Senate State: CA
District: 49
Calendar Year-To-Date Per Election for Office Sought 103916.35
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 38051.40
(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.

Lawson-Remer, Terra, ,

[Electronically Filed]

Date 10/25/2018

Signature

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SE

Transaction ID : PDTE32

Non-Contribution Account

Form/Schedule: SE

Transaction ID: PDTE33

Non-Contribution Account

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Flip the 49th! Neighbors in Action
FEC IDENTIFICATION NUMBER C C00662312

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Service Employees International Union Local 221
Mailing Address 4004 Kearny Mesa Road
City San Diego State CA Zip Code 92111
Purpose of Expenditure Staff Time for Field Program 9/2-9/29
Category/Type 24E
Date of Public Distribution/Dissemination 09/02/2018
Amount 3495.14
Transaction ID: EDTEALC108
Date of Disbursement or Obligation 09/02/2018

Name of Federal Candidate: Levin, Mike, , ,
Support Oppose
Office Sought: House Senate State: CA
District: 49
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee Service Employees International Union Local 221
Mailing Address 4004 Kearny Mesa Road
City San Diego State CA Zip Code 92111
Purpose of Expenditure Staff Time for Field Program 9/2-9/29
Category/Type 24A
Date of Public Distribution/Dissemination 09/02/2018
Amount 1398.06
Transaction ID: EDTEALC109
Date of Disbursement or Obligation 09/02/2018

Name of Federal Candidate: Harkey, Diane, , ,
Support Oppose
Office Sought: House Senate State: CA
District: 49
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 4893.20
(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.

Lawson-Remer, Terra, , ,

[Electronically Filed]

Date 10/25/2018

Signature

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SE

Transaction ID : EDTEALC108

Non-Contribution Account

Form/Schedule: SE

Transaction ID: EDTEALC109

Non-Contribution Account

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Flip the 49th! Neighbors in Action
FEC IDENTIFICATION NUMBER
C C00662312

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
Service Employees International Union Local 221
Memo Item
Mailing Address
4004 Kearny Mesa Road
City
San Diego State
CA Zip Code
92111
Purpose of Expenditure
Canvassing Expenses Category/Type
24E

Date of Public Distribution/Dissemination
09 / 10 / 2018
Amount
2562.71
Transaction ID : PDTE41
Date of Disbursement or Obligation
09 / 10 / 2018

Name of Federal Candidate:
Levin, Mike, ,
Support Oppose
Office Sought:
House Senate State: CA
District: 49

Disbursement For:
Primary General
2018 Other (specify)

Full Name of Payee
Service Employees International Union Local 221
Memo Item
Mailing Address
4004 Kearny Mesa Road
City
San Diego State
CA Zip Code
92111
Purpose of Expenditure
Canvassing Expenses Category/Type
24A

Date of Public Distribution/Dissemination
09 / 10 / 2018
Amount
854.23
Transaction ID : PDTE42
Date of Disbursement or Obligation
09 / 10 / 2018

Name of Federal Candidate:
Harkey, Diane, ,
Support Oppose
Office Sought:
House Senate State: CA
District: 49

Disbursement For:
Primary General
2018 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.

Lawson-Remer, Terra, ,
[Electronically Filed]
Date 10 / 25 / 2018
Signature

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SE

Transaction ID : PDTE41

Non-Contribution Account

Form/Schedule: SE

Transaction ID: PDTE42

Non-Contribution Account

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Flip the 49th! Neighbors in Action
FEC IDENTIFICATION NUMBER
C C00662312

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
Service Employees International Union Local 221
Memo Item
Date of Public Distribution/Dissemination
09 / 30 / 2018
Mailing Address
4004 Kearny Mesa Road
Amount
1575.04
City
San Diego State
CA Zip Code
92111
Purpose of Expenditure
Staff Time for Field Program 9/30
Category/Type
24E
Transaction ID : PDTE34
Date of Disbursement or Obligation
09 / 30 / 2018

Name of Federal Candidate:
Levin, Mike, ,
Support Oppose
Office Sought:
House Senate State: CA
District: 49
Disbursement For:
Primary General
2018 Other (specify)

Full Name of Payee
Service Employees International Union Local 221
Memo Item
Date of Public Distribution/Dissemination
09 / 30 / 2018
Mailing Address
4004 Kearny Mesa Road
Amount
525.01
City
San Diego State
CA Zip Code
92111
Purpose of Expenditure
Staff Time for Field Program 9/30
Category/Type
24A
Transaction ID : PDTE40
Date of Disbursement or Obligation
09 / 30 / 2018

Name of Federal Candidate:
Harkey, Diane, ,
Support Oppose
Office Sought:
House Senate State: CA
District: 49
Disbursement For:
Primary General
2018 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.

Lawson-Remer, Terra, ,
Signature

[Electronically Filed]

Date
10 / 25 / 2018

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SE

Transaction ID : PDTE34

Non-Contribution Account

Form/Schedule: SE

Transaction ID: PDTE40

Non-Contribution Account

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Flip the 49th! Neighbors in Action
FEC IDENTIFICATION NUMBER
C C00662312

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
Service Employees International Union Local 221
Memo Item

Date of Public Distribution/Dissemination
09 / 30 / 2018

Mailing Address
4004 Kearny Mesa Road

Amount
43.69

City State Zip Code
San Diego CA 92111

Transaction ID : EDTEALC130
Date of Disbursement or Obligation

Purpose of Expenditure
Staff Time for Field Program 9/30; in-kind
Category/Type
24A

09 / 30 / 2018

Name of Federal Candidate:
Harkey, Diane, ,
Support Oppose

Office Sought:
House District: 49
President Senate State: CA

Calendar Year-To-Date
Per Election for Office Sought
103916.35

Disbursement For:
Primary General
2018 Other (specify)

Full Name of Payee
Service Employees International Union Local 221
Memo Item

Date of Public Distribution/Dissemination
09 / 30 / 2018

Mailing Address
4004 Kearny Mesa Road

Amount
131.07

City State Zip Code
San Diego CA 92111

Transaction ID : EDTEALC131
Date of Disbursement or Obligation

Purpose of Expenditure
Staff Time for Field Program 9/30; in-kind
Category/Type
24E

09 / 30 / 2018

Name of Federal Candidate:
Levin, Mike, ,
Support Oppose

Office Sought:
House District: 49
President Senate State: CA

Calendar Year-To-Date
Per Election for Office Sought
103916.35

Disbursement For:
Primary General
2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 174.76
(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.

Lawson-Remer, Terra, ,
Signature [Electronically Filed] Date 10 / 25 / 2018

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SE

Transaction ID : EDTEALC130

Non-Contribution Account

Form/Schedule: SE

Transaction ID: EDTEALC131

Non-Contribution Account

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Flip the 49th! Neighbors in Action	FEC IDENTIFICATION NUMBER ▼ C C00662312
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item Vargas, Cipriano, , ,	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1086 Naomi Drive	Amount <input type="text"/> 2642.85
City Vista State CA Zip Code 92083	
Purpose of Expenditure Consulting for Field Program Category/Type <input type="text"/> 24E	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Levin, Mike, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 49 State: CA
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 103916.35	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item Vargas, Cipriano, , ,	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1086 Naomi Drive	Amount <input type="text"/> 1357.15
City Vista State CA Zip Code 92083	
Purpose of Expenditure Consulting for Field Program Category/Type <input type="text"/> 24A	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Harkey, Diane, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 49 State: CA
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 103916.35	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 4000.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/> 104879.28

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.

Lawson-Remer, Terra, , , [Electronically Filed]
Signature Date / /

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SE

Transaction ID : EDTEALC112

Non-Contribution Account

Form/Schedule: SE

Transaction ID: EDTEALC113

Non-Contribution Account