

**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

People's Action Power

ADDRESS (number and street)

1301 Connecticut Ave NW

Check if different
than previously
reported. (ACC)

Washington

DC

20036

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00738237

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

(b) Monthly
Report
Due On:

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

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

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

Election on

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

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

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

Election on

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

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
07 01 2026

through

M M M / D D D / Y Y Y Y Y Y
07 31 2026

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

Type or Print Name of Treasurer

Popadiak, Marta, , ,

Signature of Treasurer

Popadiak, Marta, , ,

Date

M M M / D D D / Y Y Y Y Y Y
08 20 2026

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

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

People's Action PowerReport Covering the Period: From:

M M	/	D D	/	Y Y Y Y Y
07		01		2026

 To:

M M	/	D D	/	Y Y Y Y Y
07		31		2026

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y 2026		57765.69
(b) Cash on Hand at Beginning of Reporting Period.....	343079.31	
(c) Total Receipts (from Line 19)	681.00	403851.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	343760.31	461616.69
7. Total Disbursements (from Line 31).....	9906.92	127763.30
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	333853.39	333853.39
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	14980.62	



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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

People's Action Power

Report Covering the Period:

From:

M M / D D / Y Y Y Y
07 / 01 / 2026

To:

M M / D D / Y Y Y Y
07 / 31 / 2026
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

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

0.00

10000.00

(ii) Unitemized

0.00

100.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

0.00

10100.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

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

Totals to Line 33, page 5)

0.00

10100.00

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

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

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

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

681.00

393751.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

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

0.00

0.00

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))

681.00

403851.00

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

681.00

403851.00

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	32.25	4279.10
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	32.25	4279.10
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	6000.00	39500.00
24. Independent Expenditures (use Schedule E)	0.00	38463.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	3874.67	45521.20
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)) ..	9906.92	127763.30
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	9906.92	127763.30

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	0.00	10100.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	10100.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	32.25	4279.10
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	32.25	4279.10

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 6 OF 15
(check only one)

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

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

NAME OF COMMITTEE (In Full)

People's Action Power

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

A. Beach, Paul, , ,

Mailing Address 4812 Windsor Ave

City
PhiladelphiaState
PAZip Code
19143-3498FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Bronxcare Health SystemOccupation (for Individual)
Family Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 20 / 2026

Transaction ID : 34782431

Amount of Each Receipt this Period

44.00

☐ Memo Item* Non-Contribution Account; Earmarked Contribution:
See Below

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

B. ActBlue

Mailing Address PO Box 441146

City
West SomervilleState
MAZip Code
02144-0031FEC ID number of contributing
federal political committee.**C** C00401224

Name of Employer (for Individual)

Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

681.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 34782431E

Amount of Each Receipt this Period

44.00

☒ Memo ItemNote: Above Contribution earmarked through this
organization.

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

C. Freiermuth, Anne, , ,

Mailing Address 295 Beloit Ave

City
Los AngelesState
CAZip Code
90049-3009FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Mission MathOccupation (for Individual)
Accountant

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 18 / 2026

Transaction ID : 34782428

Amount of Each Receipt this Period

25.00

☐ Memo Item* Non-Contribution Account; Earmarked Contribution:
See Below

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

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

69.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 OF 15

(check only one)

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

People's Action Power

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

A. ActBlue

Mailing Address PO Box 441146

City
West SomervilleState
MAZip Code
02144-0031FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer (for Individual)

Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

681.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	19	/	2026

Transaction ID : 34782428E

Amount of Each Receipt this Period

25.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

B. Freiermuth, Anne, , ,

Mailing Address 295 Beloit Ave

City
Los AngelesState
CAZip Code
90049-3009FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Mission MathOccupation (for Individual)
Accountant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	23	/	2026

Transaction ID : 34782436E

Amount of Each Receipt this Period

50.00

☐ Memo Item

* Non-Contribution Account; Earmarked Contribution:
See Below

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

C. ActBlue

Mailing Address PO Box 441146

City
West SomervilleState
MAZip Code
02144-0031FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer (for Individual)

Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

681.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	26	/	2026

Transaction ID : 34782436E

Amount of Each Receipt this Period

50.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

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

50.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 8 OF 15
(check only one)

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

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NAME OF COMMITTEE (In Full)

People's Action Power

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

A. Hoffman, Sarai, , ,Mailing Address 1000 W Washington Blvd
Unit 504City
ChicagoState
ILZip Code
60607-2155FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Ter Molen Watkins & BrandtOccupation (for Individual)
Nonprofit Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 05 / 2026**Transaction ID : 34782419**

Amount of Each Receipt this Period

50.00

☐ Memo Item* Non-Contribution Account; Earmarked Contribution:
See Below

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

B. ActBlue

Mailing Address PO Box 441146

City
West SomervilleState
MAZip Code
02144-0031FEC ID number of contributing
federal political committee.**C** C00401224

Name of Employer (for Individual)

Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

681.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 05 / 2026**Transaction ID : 34782419E**

Amount of Each Receipt this Period

50.00

☒ Memo ItemNote: Above Contribution earmarked through this
organization.

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

C. Mumm, James, , ,

Mailing Address 236 Clinton Ave

City
New RochelleState
NYZip Code
10801-1525FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
People's Action InstituteOccupation (for Individual)
Non-Profit Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 11 / 2026**Transaction ID : 34782423**

Amount of Each Receipt this Period

50.00

☐ Memo Item* Non-Contribution Account; Earmarked Contribution:
See Below**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

100.00

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

FOR LINE NUMBER: PAGE 9 OF 15

(check only one)

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

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NAME OF COMMITTEE (In Full)

People's Action Power

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

A. ActBlue

Mailing Address PO Box 441146

City
West SomervilleState
MAZip Code
02144-0031FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer (for Individual)

Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

681.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 12 / 2026

Transaction ID : 34782423E

Amount of Each Receipt this Period

50.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

B. Popadiak, Marta, , ,

Mailing Address 3634 N Linder Ave

City
ChicagoState
ILZip Code
60641-3216FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
The People's LobbyOccupation (for Individual)
Organizing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 04 / 2026

Transaction ID : 34782415

Amount of Each Receipt this Period

50.00

☐ Memo Item* Non-Contribution Account; Earmarked Contribution:
See Below

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

C. ActBlue

Mailing Address PO Box 441146

City
West SomervilleState
MAZip Code
02144-0031FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer (for Individual)

Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

681.00

Date of Receipt

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

Transaction ID : 34782415E

Amount of Each Receipt this Period

50.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

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

50.00

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

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

FOR LINE NUMBER: PAGE 10 OF 15
(check only one)

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

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NAME OF COMMITTEE (In Full)

People's Action Power

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

A. Pratt, Timothy, , ,

Mailing Address 45 Cedar St

City
San Anselmo

State
CA

Zip Code
94960-2747

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self Employed

Occupation (for Individual)
ESCO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

07 / 11 / 2026

Transaction ID : 34782424

Amount of Each Receipt this Period

50.00

☐ Memo Item

* Non-Contribution Account; Earmarked Contribution:
See Below

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

B. ActBlue

Mailing Address PO Box 441146

City
West Somerville

State
MA

Zip Code
02144-0031

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer (for Individual)

Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

681.00

Date of Receipt

07 / 12 / 2026

Transaction ID : 34782424E

Amount of Each Receipt this Period

50.00

☒ Memo Item

Note: Above Contribution earmarked through this
organization.

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

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

/ /

Amount of Each Receipt this Period

☐ Memo Item

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

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

50.00

319.00

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

PAGE 11 OF 15

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

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NAME OF COMMITTEE (In Full)

People's Action Power

Full Name (Last, First, Middle Initial)

A. Abdul For US Senate

Mailing Address PO Box 126

City
Saint Clair ShoresState
MIZip Code
48080-0126

Purpose of Disbursement

Federal Contribution

Candidate Name

El-Sayed, Abdul, , ,

Office Sought:

☐	House
☒	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State: MI

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	8			2	0	2	6		

FEC Identification Number

C C00902668**Transaction ID : 500267525**

Amount of Each Disbursement this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Friends Of William Lawrence

Mailing Address PO Box 10086

City
LansingState
MIZip Code
48901-0086

Purpose of Disbursement

Federal Contribution

Candidate Name

Lawrence, William, , ,

Office Sought:

☒	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify)		

State: MI

District: 07

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	8			2	0	2	6		

FEC Identification Number

C C00916809**Transaction ID : 500267524**

Amount of Each Disbursement this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

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

6000.00

6000.00

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

PAGE 12 OF 15

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

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NAME OF COMMITTEE (In Full)

People's Action Power

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address 36 Summer St

City
SomervilleState
MAZip Code
02143-1701

Purpose of Disbursement

Non-Contribution Account: Credit Card Processing Fees

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	5			2	0	2	6		

FEC Identification Number

C

Transaction ID : 500267529

Amount of Each Disbursement this Period

8.33

☐ Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address 36 Summer St

City
SomervilleState
MAZip Code
02143-1701

Purpose of Disbursement

Non-Contribution Account: Credit Card Processing Fees

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : 500267530

Amount of Each Disbursement this Period

4.76

☐ Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address 36 Summer St

City
SomervilleState
MAZip Code
02143-1701

Purpose of Disbursement

Non-Contribution Account: Credit Card Processing Fees

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	9			2	0	2	6		

FEC Identification Number

C

Transaction ID : 500267531

Amount of Each Disbursement this Period

4.29

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

17.38

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

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

FOR LINE NUMBER:
(check only one)

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☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

People's Action Power

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address 36 Summer St

City
Somerville

State
MA

Zip Code
02143-1701

Purpose of Disbursement

Non-Contribution Account: Credit Card Processing Fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 26 / 2026

FEC Identification Number

C

Transaction ID : 500267532

Amount of Each Disbursement this Period

7.42

☐ Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address 36 Summer St

City
Somerville

State
MA

Zip Code
02143-1701

Purpose of Disbursement

Non-Contribution Account: Credit Card Processing Fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 31 / 2026

FEC Identification Number

C

Transaction ID : 500267533

Amount of Each Disbursement this Period

2.23

☐ Memo Item Non-Contribution Account

Full Name (Last, First, Middle Initial)

C. Amalgamated Bank

Mailing Address 255 California St
Ste 600

City
San Francisco

State
CA

Zip Code
94111-4904

Purpose of Disbursement

Non-Contribution Account: Bank Fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 29 / 2026

FEC Identification Number

C

Transaction ID : 500267527

Amount of Each Disbursement this Period

62.00

☐ Memo Item Non-Contribution Account

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

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

71.65

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

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☐ 21b	☐ 22	☐ 23	☐ 26	☐ 27
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NAME OF COMMITTEE (In Full)

People's Action Power

Full Name (Last, First, Middle Initial)

A. Pocketbook Strategies

Mailing Address PO Box 741070

City
Los AngelesState
CAZip Code
90004-9070

Purpose of Disbursement

Non-Contribution Account: Compliance Services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	5			2	0	2	6		

FEC Identification Number

C

Transaction ID : 500267528

Amount of Each Disbursement this Period

3785.64

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

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

3785.64

3874.67

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

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

NAME OF COMMITTEE (In Full)

People's Action Power

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

CallHub

Nature of Debt (Purpose):

Estimated Cost for Auto-Dialer Services

Mailing Address 340 S Lemon Ave
7468City
WalnutState
CAZip Code
91789-2706

Outstanding Balance Beginning This Period

5000.00

Transaction ID : 1250001508

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5000.00

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

Scale To Win

Nature of Debt (Purpose):

Text Messaging

Mailing Address 13742 Harper St

City
Santa AnaState
CAZip Code
92703-1419

Outstanding Balance Beginning This Period

530.05

Transaction ID : 1250001817

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

530.05

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

The Movement Cooperative

Nature of Debt (Purpose):

Estimated Cost for Voter Outreach Calls

Mailing Address 4 E 27Th Street Greeley Square Sta

City
ChicagoState
ILZip Code
60642

Outstanding Balance Beginning This Period

9450.57

Transaction ID : 1250001080

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

9450.57

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

14980.62

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

14980.62

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) ►

14980.62