

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

Office Use Only

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

12FE4M5

ColorOfChange PAC

ADDRESS (number and street)

1714 Franklin St.

#100-136

Check if different  
than previously  
reported. (ACC)

Oakland

CA

94612

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00428557

3. IS THIS  
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)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

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

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

CA

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

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

Savado, Ismael, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Savado, Ismael, , ,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

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

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

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

ColorOfChange PAC

Report Covering the Period:

From:

 M M / D D / Y Y Y Y  
 10 18 2018

To:

 M M / D D / Y Y Y Y  
 11 26 2018

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2018		446861.26
(b) Cash on Hand at Beginning of Reporting Period.....	756177.71	
(c) Total Receipts (from Line 19) .....	1083692.76	5348270.64
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	1839870.47	5795131.90
7. Total Disbursements (from Line 31).....	768500.19	4723761.62
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	1071370.28	1071370.28
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	



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

## For further information contact:

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

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

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

ColorOfChange PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
10		18		2018

To:

M M	/	D D	/	Y Y Y Y
11		26		2018

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	0.00	0.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	1083692.76	5348270.64
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)) .....	1083692.76	5348270.64
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	1083692.76	5348270.64

**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 .....	569.40	571.90
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	569.40	571.90
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	10381.60	12214.23
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).....	757549.19	4710975.49
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)) ..	768500.19	4723761.62
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	768500.19	4723761.62

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	0.00	0.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....▶	569.40	571.90
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	569.40	571.90

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

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

FOR LINE NUMBER: PAGE 6 OF 313

(check only one)

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Abney-Babcock, Louisa, , ,**

Mailing Address 1607 Gravel Pike

City  
Perkiomenville

State  
PA

Zip Code  
18074-9693

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 ▼

210.00

Date of Receipt

**11** / **21** / **2018**

**Transaction ID : VTQZWHGB907**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B. Ackerman, Maribeth, , ,**

Mailing Address 1943 253rd Pl

City  
Lomita

State  
CA

Zip Code  
90717-1848

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Universal Music Publishing Group

Occupation (for Individual)  
Director Royalties

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**11** / **02** / **2018**

**Transaction ID : VTQZWHG7ZJ6**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**C. Ackerman, Thomas, , ,**

Mailing Address 4424 Griffin Ave

City  
Los Angeles

State  
CA

Zip Code  
90031-1420

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
CARMAX

Occupation (for Individual)  
Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG2BY6**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

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

100.00

# **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 313

(check only one)

<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)

ColorOfChange PAC

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

**A. Ackerman, Thomas, , ,**

Mailing Address 4424 Griffin Ave

City  
Los Angeles

State  
CA

Zip Code  
90031-1420

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CARMAX

Occupation (for Individual)  
Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2018

Transaction ID : VTQZWHGDPE1

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**B. Adams, Chantel, , ,**

Mailing Address 7120 Pasadena Ave

City  
Dallas

State  
TX

Zip Code  
75214-3818

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self employed

Occupation (for Individual)  
Domestic engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2018

Transaction ID : VTQZWHG7635

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

**C. Adams, Katherine, , ,**

Mailing Address 1537 W Touhy Ave  
# 2

City  
Chicago

State  
IL

Zip Code  
60626-2623

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self Employed

Occupation (for Individual)  
Stage Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2018

Transaction ID : VTQZWHG4K05

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

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

325.00

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 313

(check only one)

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Adams, Katherine, , ,**

Mailing Address 1537 W Touhy Ave  
# 2

City  
Chicago

State  
IL

Zip Code  
60626-2623

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Stage Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG5Q84**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B. Adams, Katherine, , ,**

Mailing Address 1537 W Touhy Ave  
# 2

City  
Chicago

State  
IL

Zip Code  
60626-2623

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Stage Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 21 / 2018

**Transaction ID : VTQZWHGDW21**

Amount of Each Receipt this Period

30.00

☐ Memo Item

Non-Contribution Account

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

**C. Aditya, Mahesh, , ,**

Mailing Address 21 Winthrop Rd

City  
Belmont

State  
MA

Zip Code  
02478-2358

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Santander Holdings

Occupation (for Individual)

Banker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG38F1**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

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

180.00



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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 313

(check only one)

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Aditya, Mahesh, , ,**

Mailing Address 21 Winthrop Rd

City  
Belmont

State  
MA

Zip Code  
02478-2358

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Santander Holdings

Occupation (for Individual)  
Banker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG4JF0**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

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

**B. Akina-James, Sadikifu, , ,**

Mailing Address 1122 E Pike St  
# 1223

City  
Seattle

State  
WA

Zip Code  
98122-3916

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
none

Occupation (for Individual)  
none

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG5Y63**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**C. Akina-James, Sadikifu, , ,**

Mailing Address 1122 E Pike St  
# 1223

City  
Seattle

State  
WA

Zip Code  
98122-3916

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
none

Occupation (for Individual)  
none

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG5YQ8**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

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

550.00

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 313

(check only one)

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Akina-James, Sadikifu, , ,**

Mailing Address 1122 E Pike St  
# 1223

City  
Seattle

State  
WA

Zip Code  
98122-3916

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
none

Occupation (for Individual)  
none

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

**11 / 09 / 2018**

**Transaction ID : VTQZWHG8S67**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

**B. Allison, Michael, , ,**

Mailing Address 10 Harbord Ct

City  
Oakland

State  
CA

Zip Code  
94618-2503

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
self

Occupation (for Individual)  
consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**10 / 26 / 2018**

**Transaction ID : VTQZWHG7KP2**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

**C. An, Pati, , ,**

Mailing Address 16044 NE 180th St

City  
Woodinville

State  
WA

Zip Code  
98072-9637

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Not Employed

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**11 / 02 / 2018**

**Transaction ID : VTQZWHG86N5**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

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

510.00

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

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

FOR LINE NUMBER: PAGE 11 OF 313

(check only one)

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Andersen, Erika, , ,**

Mailing Address 93 Timber Line Trail

City  
West Park

State  
NY

Zip Code  
12493

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Proteus International Inc

Occupation (for Individual)  
CEO Author

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG25N3**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**B. Andersen, Erika, , ,**

Mailing Address 93 Timber Line Trail

City  
West Park

State  
NY

Zip Code  
12493

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Proteus International Inc

Occupation (for Individual)  
CEO Author

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

**11 / 21 / 2018**

**Transaction ID : VTQZWHGDST2**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**C. Arbitblit, Donald, , ,**

Mailing Address 988 Creston Rd

City  
Berkeley

State  
CA

Zip Code  
94708-1544

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Lief Cabraser

Occupation (for Individual)  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

**11 / 21 / 2018**

**Transaction ID : VTQZWHGAEQ2**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

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

300.00

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

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

FOR LINE NUMBER: PAGE 12 OF 313

(check only one)

<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)

ColorOfChange PAC

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

A. Armstrong, Adrienne, , ,

Mailing Address 2850 Ocean Park Blvd  
Ste 300City  
Santa MonicaState  
CAZip Code  
90405-6216FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Atomic GardenOccupation (for Individual)  
Owner

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  
10 / 19 / 2018

Transaction ID : VTQZWHG5HJ0

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Non-Contribution Account

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

B. Arp, Andrice, , ,

Mailing Address 202 SE 47th Ave

City  
PortlandState  
ORZip Code  
97215-1024FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 26 / 2018

Transaction ID : VTQZWHG6YY0

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

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

C. Arp, Andrice, , ,

Mailing Address 202 SE 47th Ave

City  
PortlandState  
ORZip Code  
97215-1024FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 21 / 2018

Transaction ID : VTQZWHGDV36

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

1600.00

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

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

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

FOR LINE NUMBER: PAGE 13 OF 313

(check only one)

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Artemieff, Suzanne, , ,**

Mailing Address 79 Upper Baptist Hill Rd

City  
Conway

State  
MA

Zip Code  
01341-9627

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

10 / 19 / 2018

Transaction ID : VTQZWHG5QS8

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**B. Ash, Arlene, , ,**

Mailing Address 73 Hemenway St  
Apt 207

City  
Boston

State  
MA

Zip Code  
02115-2956

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
UMass Medical School

Occupation (for Individual)  
Health Care Statistician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 19 / 2018

Transaction ID : VTQZWHG2JN0

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

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

**C. Atwood, Gretchen, , ,**

Mailing Address 151 Bronte St

City  
San Francisco

State  
CA

Zip Code  
94110-6206

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Pac-12 Networks

Occupation (for Individual)  
Sr. Design and Research Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

11 / 21 / 2018

Transaction ID : VTQZWHGABY9

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

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

775.00

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

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

FOR LINE NUMBER: PAGE 14 OF 313

(check only one)

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Avant, Ricki, , ,**

Mailing Address 2 Winterview Rd

City  
Freeport

State  
ME

Zip Code  
04032-6210

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Social Worker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 21 / 2018

**Transaction ID : VTQZWHGCPA3**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**B. Baier, Ellen, , ,**

Mailing Address 10 Brook Dr

City  
Burlington

State  
VT

Zip Code  
05408-1103

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Gray TV

Occupation (for Individual)

Traffic Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

263.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG26J2**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**C. Baier, Ellen, , ,**

Mailing Address 10 Brook Dr

City  
Burlington

State  
VT

Zip Code  
05408-1103

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Gray TV

Occupation (for Individual)

Traffic Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

263.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 26 / 2018

**Transaction ID : VTQZWHG6ZT1**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

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

135.00

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

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

FOR LINE NUMBER: PAGE 15 OF 313

(check only one)

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Baier, Ellen, , ,**

Mailing Address 10 Brook Dr

City  
Burlington

State  
VT

Zip Code  
05408-1103

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Gray TV

Occupation (for Individual)  
Traffic Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

263.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 26 / 2018

**Transaction ID : VTQZWHG79R6**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

**B. Baier, Ellen, , ,**

Mailing Address 10 Brook Dr

City  
Burlington

State  
VT

Zip Code  
05408-1103

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Gray TV

Occupation (for Individual)  
Traffic Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

263.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 21 / 2018

**Transaction ID : VTQZWHGBJQ8**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**C. Baier, Ellen, , ,**

Mailing Address 10 Brook Dr

City  
Burlington

State  
VT

Zip Code  
05408-1103

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Gray TV

Occupation (for Individual)  
Traffic Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

263.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 21 / 2018

**Transaction ID : VTQZWHGBXG7**

Amount of Each Receipt this Period

30.00

☐ Memo Item

Non-Contribution Account

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

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

65.00

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

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

FOR LINE NUMBER: PAGE 16 OF 313

(check only one)

<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)

ColorOfChange PAC

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

A. Baker, Charles, , ,

Mailing Address 37 N 4th St

City  
LewisburgState  
PAZip Code  
17837-1401FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

A company

Occupation (for Individual)

Software Developer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

Transaction ID : VTQZWHG4J35

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

B. Baker, Lee, , ,

Mailing Address 2506 Sylvan Rd

City  
GreensboroState  
NCZip Code  
27403-1620FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

Transaction ID : VTQZWHG55V6

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

C. Baker, Lee, , ,

Mailing Address 2506 Sylvan Rd

City  
GreensboroState  
NCZip Code  
27403-1620FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		21		2018

Transaction ID : VTQZWHGBRQ0

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

120.00

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



# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 OF 313

(check only one)

<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)

ColorOfChange PAC

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

A. Balwally, Nandakumar, , ,

Mailing Address 4848 Marybrook Dr

City  
KetteringState  
OHZip Code  
45429-5727FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

Transaction ID : VTQZWHG29Q8

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

B. Balwally, Nandakumar, , ,

Mailing Address 4848 Marybrook Dr

City  
KetteringState  
OHZip Code  
45429-5727FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

Transaction ID : VTQZWHG5RB0

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

C. Balwally, Nandakumar, , ,

Mailing Address 4848 Marybrook Dr

City  
KetteringState  
OHZip Code  
45429-5727FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID : VTQZWHG8DJ4

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

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

200.00

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

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

FOR LINE NUMBER: PAGE 18 OF 313

(check only one)

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Banks, Hannah, , ,**

Mailing Address 107 Garland Rd

City  
Newton

State  
MA

Zip Code  
02459-1741

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Architect

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG4ZY7**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B. Banks, Hannah, , ,**

Mailing Address 107 Garland Rd

City  
Newton

State  
MA

Zip Code  
02459-1741

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Architect

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

**11 / 21 / 2018**

**Transaction ID : VTQZWHGAAP5**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C. Barrett, Fiona, , ,**

Mailing Address 933 42nd St

City  
Oakland

State  
CA

Zip Code  
94608-3711

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Pacific Foundation Services

Occupation (for Individual)

Vice President Administration

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG5001**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

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

125.00

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

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

FOR LINE NUMBER: PAGE 19 OF 313

(check only one)

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Barrett, Lisa, , ,**

Mailing Address 1350 Sherman Hollow Rd

City  
Huntington

State  
VT

Zip Code  
05462-9416

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5560.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG2MW1**

Amount of Each Receipt this Period

30.00

☐ Memo Item

Non-Contribution Account

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

**B. Barrett, Lisa, , ,**

Mailing Address 1350 Sherman Hollow Rd

City  
Huntington

State  
VT

Zip Code  
05462-9416

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5560.00

Date of Receipt

**11** / **21** / **2018**

**Transaction ID : VTQZWHGE715**

Amount of Each Receipt this Period

30.00

☐ Memo Item

Non-Contribution Account

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

**C. Bay, Rosemary, , ,**

Mailing Address 324 Hudson View Ter

City  
Hyde Park

State  
NY

Zip Code  
12538-3552

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Not employed

Occupation (for Individual)

Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG4BX5**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

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

85.00

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

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

FOR LINE NUMBER: PAGE 20 OF 313

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Bay, Rosemary, , ,**

Mailing Address 324 Hudson View Ter

City  
Hyde Park

State  
NY

Zip Code  
12538-3552

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Not employed

Occupation (for Individual)

Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG5CT1**

Amount of Each Receipt this Period

5.00

☐ Memo Item

Non-Contribution Account

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

**B. Bay, Rosemary, , ,**

Mailing Address 324 Hudson View Ter

City  
Hyde Park

State  
NY

Zip Code  
12538-3552

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Not employed

Occupation (for Individual)

Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

**11 / 21 / 2018**

**Transaction ID : VTQZWHG9EF2**

Amount of Each Receipt this Period

5.00

☐ Memo Item

Non-Contribution Account

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

**C. Beard, Hilary, , ,**

Mailing Address 415 Glen Echo Rd

City  
Philadelphia

State  
PA

Zip Code  
19119-2915

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Self

Occupation (for Individual)

Writer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

290.00

Date of Receipt

**11 / 09 / 2018**

**Transaction ID : VTQZWHG8SN6**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

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

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

30.00

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

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

FOR LINE NUMBER: PAGE 21 OF 313

(check only one)

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Beard, Hilary, , ,**

Mailing Address 415 Glen Echo Rd

City  
Philadelphia

State  
PA

Zip Code  
19119-2915

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Self

Occupation (for Individual)  
Writer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

**11** / **21** / **2018**

**Transaction ID : VTQZWHGDCT4**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**B. Belknap, Joanne, , ,**

Mailing Address 3075 7th St

City  
Boulder

State  
CO

Zip Code  
80304-2509

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
University of Colorado-Boulder

Occupation (for Individual)  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG4TH2**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C. Belknap, Joanne, , ,**

Mailing Address 3075 7th St

City  
Boulder

State  
CO

Zip Code  
80304-2509

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
University of Colorado-Boulder

Occupation (for Individual)  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

**10** / **26** / **2018**

**Transaction ID : VTQZWHG7HS0**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

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

200.00

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

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

FOR LINE NUMBER: PAGE 22 OF 313

(check only one)

<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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Belknap, Joanne, , ,

Mailing Address 3075 7th St

City  
BoulderState  
COZip Code  
80304-2509FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
University of Colorado-BoulderOccupation (for Individual)  
Professor

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
11	/	21	/	2018

Transaction ID : VTQZWHGD402

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

B. Benedict, Elizabeth, , ,

Mailing Address 17 Ahab Dr

City  
Muir BeachState  
CAZip Code  
94965-9712FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/AOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : VTQZWHG88C7

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

C. Berge, David, , ,

Mailing Address P.O. Bo x443

City  
Island PondState  
VTZip Code  
05846FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Underdog FoundationOccupation (for Individual)  
non-profit

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : VTQZWHG94W4

Amount of Each Receipt this Period

300.00

☐ Memo Item

Non-Contribution Account

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

450.00

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

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

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

FOR LINE NUMBER: PAGE 23 OF 313

(check only one)

<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)

ColorOfChange PAC

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

A. Berk, Marjorie, , ,

Mailing Address 7 E 14th St

Apt 1117

City

New York

State

NY

Zip Code

10003-3118

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

670.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

Transaction ID : VTQZWHG2Z29

Amount of Each Receipt this Period

150.00

☐ Memo Item

Non-Contribution Account

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

B. Berk, Marjorie, , ,

Mailing Address 7 E 14th St

Apt 1117

City

New York

State

NY

Zip Code

10003-3118

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

670.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		21		2018

Transaction ID : VTQZWHGBMA1

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

C. Bernholz, Lucy, , ,

Mailing Address 266 30th St

City

San Francisco

State

CA

Zip Code

94131-2421

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Stanford PACS/Digital Civil Society La

Occupation (for Individual)

Researcher

Receipt For:

☐ Primary  
☐ Other (specify)

General

Aggregate Year-to-Date ▼

364.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

Transaction ID : VTQZWHG3HX9

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

350.00

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

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

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

FOR LINE NUMBER: PAGE 24 OF 313

(check only one)

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Bernholz, Lucy, , ,**

Mailing Address 266 30th St

City

San Francisco

State

CA

Zip Code

94131-2421

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Stanford PACS/Digital Civil Society La

Occupation (for Individual)

Researcher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG5YC1**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**B. Bernholz, Lucy, , ,**

Mailing Address 266 30th St

City

San Francisco

State

CA

Zip Code

94131-2421

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Stanford PACS/Digital Civil Society La

Occupation (for Individual)

Researcher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.00

Date of Receipt

**11 / 21 / 2018**

**Transaction ID : VTQZWHGAK91**

Amount of Each Receipt this Period

15.00

☐ Memo Item

Non-Contribution Account

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

**C. Bernstein, Susan, , ,**

Mailing Address 82 Ellery St

City

Cambridge

State

MA

Zip Code

02138-4355

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

self

Occupation (for Individual)

artist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**11 / 16 / 2018**

**Transaction ID : VTQZWHG9624**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

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

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

615.00



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

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

FOR LINE NUMBER: PAGE 25 OF 313

(check only one)

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Bettner, Margaret, , ,**

Mailing Address 20 Alvarado Ave

City  
Mill Valley

State  
CA

Zip Code  
94941-1320

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.33

Date of Receipt

**10 / 26 / 2018**

**Transaction ID : VTQZWHG7540**

Amount of Each Receipt this Period

333.33

☐ Memo Item

Non-Contribution Account

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

**B. Bing, Jennifer, , ,**

Mailing Address 735 Andover St

City

San Francisco

State

CA

Zip Code

94110-6017

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Self

Occupation (for Individual)

Event Producer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

**11 / 09 / 2018**

**Transaction ID : VTQZWHG8KX4**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**C. Bird, Deborah, , ,**

Mailing Address 708 Angelus Pl

City

Venice

State

CA

Zip Code

90291-4919

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

UCLA

Occupation (for Individual)

Researcher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

204.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG40R2**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

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

408.33

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

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

FOR LINE NUMBER: PAGE 26 OF 313

(check only one)

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Bird, Deborah, , ,**

Mailing Address 708 Angelus Pl

City  
Venice

State  
CA

Zip Code  
90291-4919

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

UCLA

Occupation (for Individual)

Researcher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

**11 / 21 / 2018**

**Transaction ID : VTQZWHGAXY9**

Amount of Each Receipt this Period

30.00

☐ Memo Item

Non-Contribution Account

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

**B. Black, Russell, , ,**

Mailing Address 1036 Hiawatha Ct

City  
Saginaw

State  
TX

Zip Code  
76131-4832

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

**11 / 21 / 2018**

**Transaction ID : VTQZWHGC9B2**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**C. Blake, Jaclyn, , ,**

Mailing Address 39 E 12th St  
Apt 711

City  
New York

State  
NY

Zip Code  
10003-4621

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**11 / 21 / 2018**

**Transaction ID : VTQZWHGCM32**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

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

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

630.00

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

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

FOR LINE NUMBER: PAGE 27 OF 313

(check only one)

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Block, Gay, , ,**

Mailing Address 369 Montezuma Ave  
# 310

City  
Santa Fe

State  
NM

Zip Code  
87501-2835

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Artist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG4WC9**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B. Bloom, Matthew, , ,**

Mailing Address 149 Congress St

City

Brooklyn

State

NY

Zip Code

11201-6103

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

WSMS

Occupation (for Individual)

Administration

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 26 / 2018

**Transaction ID : VTQZWHG7964**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**C. Blumfelder, Theresa, , ,**

Mailing Address 5121 Tennis Court St W

City

Las Vegas

State

NV

Zip Code

89120-1345

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Not employed

Occupation (for Individual)

Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG2W64**

Amount of Each Receipt this Period

60.00

☐ Memo Item

Non-Contribution Account

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

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

210.00

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

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

FOR LINE NUMBER: PAGE 28 OF 313

(check only one)

<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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Blumfelder, Theresa, , ,

Mailing Address 5121 Tennis Court St W

City

Las Vegas

State

NV

Zip Code

89120-1345

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Not employed

Occupation (for Individual)

Not employed

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2018

Transaction ID : VTQZWHG7MM7

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

B. Blumfelder, Theresa, , ,

Mailing Address 5121 Tennis Court St W

City

Las Vegas

State

NV

Zip Code

89120-1345

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Not employed

Occupation (for Individual)

Not employed

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

420.00

Date of Receipt

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

Transaction ID : VTQZWHG8XS4

Amount of Each Receipt this Period

60.00

☐ Memo Item

Non-Contribution Account

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

C. Borchardt, Susan, , ,

Mailing Address 320 5th St SE

City

Washington

State

DC

Zip Code

20003-2048

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Gardener

Receipt For:

☐ Primary  
☐ Other (specify)
☐ General

Aggregate Year-to-Date ▼

212.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2018

Transaction ID : VTQZWHG6XV5

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

170.00

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

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

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

FOR LINE NUMBER: PAGE 29 OF 313

(check only one)

<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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Borchardt, Susan, , ,

Mailing Address 320 5th St SE

City  
WashingtonState  
DCZip Code  
20003-2048FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Gardener

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2018

Transaction ID : VTQZWHGAJX6

Amount of Each Receipt this Period

27.00

☐ Memo Item

Non-Contribution Account

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

B. Bowra, Susanne, , ,

Mailing Address 7712 Hellman Rd

City  
ClintonState  
WAZip Code  
98236-9407FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Pfizer

Occupation (for Individual)

Field Medical Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2018

Transaction ID : VTQZWHG6PW7

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

C. Braun, Robb, , ,

Mailing Address 26858 China Dr

City  
MenifeeState  
CAZip Code  
92585-9145FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Motivator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

287.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2018

Transaction ID : VTQZWHG51T9

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

87.00

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

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 OF 313

(check only one)

<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)

ColorOfChange PAC

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

A. Brayshaw, Laurie, , ,

Mailing Address 108 La Joya Rd

City  
Santa FeState  
NMZip Code  
87501-2345FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Institute of American Indian ArtsOccupation (for Individual)  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2018

Transaction ID : VTQZWHG7MP3

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

B. Brayshaw, Laurie, , ,

Mailing Address 108 La Joya Rd

City  
Santa FeState  
NMZip Code  
87501-2345FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Institute of American Indian ArtsOccupation (for Individual)  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

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

Transaction ID : VTQZWHG8X56

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

C. Brayshaw, Laurie, , ,

Mailing Address 108 La Joya Rd

City  
Santa FeState  
NMZip Code  
87501-2345FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Institute of American Indian ArtsOccupation (for Individual)  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		21		2018

Transaction ID : VTQZWHGDCM8

Amount of Each Receipt this Period

30.00

☐ Memo Item

Non-Contribution Account

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

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

105.00

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

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

FOR LINE NUMBER: PAGE 31 OF 313

(check only one)

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Broadwell, Nikki, , ,**

Mailing Address 15021 N. Swan R n. swan road

City  
Tucson

State  
AZ

Zip Code  
85739

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
self

Occupation (for Individual)  
writer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

**11** / **09** / **2018**

**Transaction ID : VTQZWHG8D38**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

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

**B. Burns, Phoebe, , ,**

Mailing Address 193 Osborn St

City  
Philadelphia

State  
PA

Zip Code  
19128-3716

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG50Z6**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

**C. Burns, Phoebe, , ,**

Mailing Address 193 Osborn St

City  
Philadelphia

State  
PA

Zip Code  
19128-3716

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

285.00

Date of Receipt

**11** / **09** / **2018**

**Transaction ID : VTQZWHG8SM8**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

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

55.00

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

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

FOR LINE NUMBER: PAGE 32 OF 313

(check only one)

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Butler, Ina, , ,**

Mailing Address 12013 Branridge Rd

City

Black Jack

State

MO

Zip Code

63033-7306

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG3WG2**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B. Cadet, Martine, , ,**

Mailing Address 222 Sheridan Ave

City

Mount Vernon

State

NY

Zip Code

10552-1407

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Infor

Occupation (for Individual)

Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**11 / 21 / 2018**

**Transaction ID : VTQZWHGC597**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

**C. Campbell, Stacia, , ,**

Mailing Address 1990 S Bundy Dr

City

Los Angeles

State

CA

Zip Code

90025-5240

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

self

Occupation (for Individual)

Self-employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**11 / 21 / 2018**

**Transaction ID : VTQZWHGB8Z9**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

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

550.00



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

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

FOR LINE NUMBER: PAGE 33 OF 313

(check only one)

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Capeci, Jenna, , ,**

Mailing Address 3554 80th St

City

Jackson Heights

State

NY

Zip Code

11372-4985

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Proteus fund

Occupation (for Individual)

Nonprofit worker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG4RX4**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B. Capeci, Jenna, , ,**

Mailing Address 3554 80th St

City

Jackson Heights

State

NY

Zip Code

11372-4985

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Proteus fund

Occupation (for Individual)

Nonprofit worker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

**11 / 21 / 2018**

**Transaction ID : VTQZWHG9DV4**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**C. Cartwright, Esther, , ,**

Mailing Address 7 Lowell St

City

Asheville

State

NC

Zip Code

28803-2545

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

AvL technologies

Occupation (for Individual)

Hr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

380.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG2K65**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

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

250.00

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

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

FOR LINE NUMBER: PAGE 34 OF 313

(check only one)

<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)

ColorOfChange PAC

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

A. Cartwright, Esther, , ,

Mailing Address 7 Lowell St

City  
AshevilleState  
NCZip Code  
28803-2545FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AvL technologiesOccupation (for Individual)  
Hr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2018

Transaction ID : VTQZWHG7VC0

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

B. Cartwright, Esther, , ,

Mailing Address 7 Lowell St

City  
AshevilleState  
NCZip Code  
28803-2545FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AvL technologiesOccupation (for Individual)  
Hr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

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

Transaction ID : VTQZWHG8D04

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

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

C. Cascade, Catherine, , ,

Mailing Address 23296 Bird Haven Ln

City  
CheshireState  
ORZip Code  
97419-9724FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/AOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

Transaction ID : VTQZWHG5J34

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

170.00

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

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

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

FOR LINE NUMBER: PAGE 35 OF 313

(check only one)

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Cazden, Courtney, , ,**

Mailing Address 1010 Waltham St

City  
Lexington

State  
MA

Zip Code  
02421-8044

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

490.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG2C85**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

**B. Cazden, Courtney, , ,**

Mailing Address 1010 Waltham St

City  
Lexington

State  
MA

Zip Code  
02421-8044

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

490.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG4DR9**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C. Cazden, Courtney, , ,**

Mailing Address 1010 Waltham St

City  
Lexington

State  
MA

Zip Code  
02421-8044

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

490.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 26 / 2018

**Transaction ID : VTQZWHG6W90**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

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

160.00

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

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

FOR LINE NUMBER: PAGE 36 OF 313

(check only one)

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Cazden, Courtney, , ,**

Mailing Address 1010 Waltham St

City  
Lexington

State  
MA

Zip Code  
02421-8044

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

490.00

Date of Receipt

11 / 21 / 2018

**Transaction ID : VTQZWHGDWF2**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

**B. Cervantes, Francesca, , ,**

Mailing Address 45 Prado Way

City  
Lafayette

State  
CA

Zip Code  
94549-2332

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not Employed

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.00

Date of Receipt

11 / 09 / 2018

**Transaction ID : VTQZWHG8ZT8**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**C. Chamlee, Elizabeth K, , ,**

Mailing Address 304 Federal St

City  
Beaufort

State  
SC

Zip Code  
29902-4764

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 ▼

350.00

Date of Receipt

11 / 09 / 2018

**Transaction ID : VTQZWHG8DC7**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

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

210.00

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

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

FOR LINE NUMBER: PAGE 37 OF 313

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Chamlee, Elizabeth K, , ,**

Mailing Address 304 Federal St

City  
Beaufort

State  
SC

Zip Code  
29902-4764

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 ▼

350.00

Date of Receipt

**11** / **21** / **2018**

**Transaction ID : VTQZWHGAR36**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

**B. Chen, Sharon, , ,**

Mailing Address 1526 17th Ave E

City  
Seattle

State  
WA

Zip Code  
98112-2809

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Not Employed

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG55S0**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

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

**c. Chen, Siu Ling, , ,**

Mailing Address 49 Greenview Ct

City  
San Francisco

State  
CA

Zip Code  
94131-1254

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Not Employed

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

**11** / **21** / **2018**

**Transaction ID : VTQZWHGBEM5**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

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

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

770.00

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

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

FOR LINE NUMBER: PAGE 38 OF 313

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Christenson, Kelli, , ,**

Mailing Address 1222 Arabella St

City  
New Orleans

State  
LA

Zip Code  
70115-4203

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Not employed

Occupation (for Individual)

Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**11 / 21 / 2018**

**Transaction ID : VTQZWHGC080**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

**B. Christoforakis, Andrew, , ,**

Mailing Address 1041 Nerge Rd  
Apt 411

City  
Elk Grove Village

State  
IL

Zip Code  
60007-3230

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG4QY9**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

**C. Citerman, Ty, , ,**

Mailing Address 1818 Newkirk Ave  
Apt 2B

City  
Brooklyn

State  
NY

Zip Code  
11226-7308

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Self

Occupation (for Individual)

Musician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG41E6**

Amount of Each Receipt this Period

400.00

☐ Memo Item

Non-Contribution Account

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

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

660.00

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

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

FOR LINE NUMBER: PAGE 39 OF 313

(check only one)

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Citerman, Ty, , ,**

Mailing Address 1818 Newkirk Ave  
Apt 2B

City  
Brooklyn

State  
NY

Zip Code  
11226-7308

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self

Occupation (for Individual)  
Musician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 26 / 2018

**Transaction ID : VTQZWHG7449**

Amount of Each Receipt this Period

150.00

☐ Memo Item

Non-Contribution Account

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

**B. Clark, Julie, , ,**

Mailing Address 16792 SE Knoll Ct

City  
Portland

State  
OR

Zip Code  
97267-6371

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not Employed

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG3Q05**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**C. Clark, Julie, , ,**

Mailing Address 16792 SE Knoll Ct

City  
Portland

State  
OR

Zip Code  
97267-6371

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not Employed

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG4672**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

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

185.00

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

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

FOR LINE NUMBER: PAGE 40 OF 313

(check only one)

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Clark, Julie, , ,**

Mailing Address 16792 SE Knoll Ct

City  
Portland

State  
OR

Zip Code  
97267-6371

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG5714**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**B. Clarke-holmes, Joy, , ,**

Mailing Address 1707 Justine Way

City  
Upland

State  
CA

Zip Code  
91784-8070

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG2BG8**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

**C. Coatney, Clyde, , ,**

Mailing Address 1117 Forrest St

City  
Louisville

State  
KY

Zip Code  
40217-2205

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Not employed

Occupation (for Individual)

Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG4H25**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

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

450.00



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

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

FOR LINE NUMBER: PAGE 41 OF 313

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Coffin, Sandra, , ,**

Mailing Address 250 W 104th St

City  
New York

State  
NY

Zip Code  
10025-4220

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Musician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**10 / 26 / 2018**

**Transaction ID : VTQZWHG6ZN1**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**B. Cole, Norma, , ,**

Mailing Address 282 28th St

City

San Francisco

State

CA

Zip Code

94131-2359

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

University of San Francisco

Occupation (for Individual)

Lecturer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

**11 / 02 / 2018**

**Transaction ID : VTQZWHG82Z5**

Amount of Each Receipt this Period

5.00

☐ Memo Item

Non-Contribution Account

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

**C. Cole, Norma, , ,**

Mailing Address 282 28th St

City

San Francisco

State

CA

Zip Code

94131-2359

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

University of San Francisco

Occupation (for Individual)

Lecturer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

315.00

Date of Receipt

**11 / 21 / 2018**

**Transaction ID : VTQZWHGBAE0**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

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

130.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 OF 313

(check only one)

<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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Collins, Maggie, , ,

Mailing Address 535 Geary St  
Apt 502City  
San FranciscoState  
CAZip Code  
94102-1630FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Bay Ship &amp; Yacht

Occupation (for Individual)

Project Superintendent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

Transaction ID : VTQZWHG4NK8

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

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

B. Collins, Maggie, , ,

Mailing Address 535 Geary St  
Apt 502City  
San FranciscoState  
CAZip Code  
94102-1630FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Bay Ship &amp; Yacht

Occupation (for Individual)

Project Superintendent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

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

Transaction ID : VTQZWHG8VK3

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

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

c. ColorOfChange.org

Mailing Address 1714 Franklin St  
# 100-136City  
OaklandState  
CAZip Code  
94612-3488FEC 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 ▼

77241.86

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 26 / 2018

Transaction ID : VTQZWHGF5H4

Amount of Each Receipt this Period

2272.91

☐ Memo Item

Refund of Salary Overpayment, Non-Contribution Account

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

2312.91

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

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

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

FOR LINE NUMBER: PAGE 43 OF 313

(check only one)

<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)

ColorOfChange PAC

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

A. Conant, Alison, , ,

Mailing Address 68 Brookside Ave

City  
NewtonvilleState  
MAZip Code  
02460-1530FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/AOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

940.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

Transaction ID : VTQZWHG31T2

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

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

B. Conant, Alison, , ,

Mailing Address 68 Brookside Ave

City  
NewtonvilleState  
MAZip Code  
02460-1530FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/AOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

940.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

Transaction ID : VTQZWHG4CV2

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

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

C. Condega, Laura, , ,

Mailing Address 27 Gates Rd

City  
PrincetonState  
MAZip Code  
01541-1601FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Springfield Public SchoolsOccupation (for Individual)  
teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

Transaction ID : VTQZWHG4P68

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

530.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 44 OF 313

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Condega, Laura, , ,**

Mailing Address 27 Gates Rd

City  
Princeton

State  
MA

Zip Code  
01541-1601

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Springfield Public Schools

Occupation (for Individual)  
teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

10 / 19 / 2018

**Transaction ID : VTQZWHG4PB8**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

**B. Condega, Laura, , ,**

Mailing Address 27 Gates Rd

City  
Princeton

State  
MA

Zip Code  
01541-1601

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Springfield Public Schools

Occupation (for Individual)  
teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 09 / 2018

**Transaction ID : VTQZWHG8VX2**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

**C. Condega, Laura, , ,**

Mailing Address 27 Gates Rd

City  
Princeton

State  
MA

Zip Code  
01541-1601

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Springfield Public Schools

Occupation (for Individual)  
teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 09 / 2018

**Transaction ID : VTQZWHG94P6**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

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

30.00

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

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

FOR LINE NUMBER: PAGE 45 OF 313

(check only one)

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Conley, Eli, , ,**

Mailing Address 1648 Russell St  
Apt 5

City  
Berkeley

State  
CA

Zip Code  
94703-2049

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Musician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 26 / 2018

**Transaction ID : VTQZWHG6KS7**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

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

**B. Conner, Denise, , ,**

Mailing Address 916 Cobble Creek Curv

City

Newark

State

DE

Zip Code

19702-2422

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Chemours

Occupation (for Individual)

Chemist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG3TX9**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**C. Connolly, Jeremy, , ,**

Mailing Address 42 Delevan St

City

Brooklyn

State

NY

Zip Code

11231-1808

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

535.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG2DC9**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

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

610.00

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

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

FOR LINE NUMBER: PAGE 46 OF 313

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Connolly, Jeremy, , ,**

Mailing Address 42 Delevan St

City  
Brooklyn

State  
NY

Zip Code  
11231-1808

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Not Employed

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

535.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG5BC0**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

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

**B. Connolly, Jeremy, , ,**

Mailing Address 42 Delevan St

City  
Brooklyn

State  
NY

Zip Code  
11231-1808

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Not Employed

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

535.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG5BD7**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

**C. Connolly, Jeremy, , ,**

Mailing Address 42 Delevan St

City  
Brooklyn

State  
NY

Zip Code  
11231-1808

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Not Employed

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

535.00

Date of Receipt

**11** / **21** / **2018**

**Transaction ID : VTQZWHGB5A7**

Amount of Each Receipt this Period

15.00

☐ Memo Item

Non-Contribution Account

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

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

525.00

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

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

FOR LINE NUMBER: PAGE 47 OF 313

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Connors, Julie, , ,**

Mailing Address 71 Lafayette Ave NE

City

Grand Rapids

State

MI

Zip Code

49503-3336

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

11 / 02 / 2018

Transaction ID : VTQZWHG88B9

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**B. Conway, John, , ,**

Mailing Address 7716 Annandale Mains Ct

City

Annandale

State

VA

Zip Code

22003-2430

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self

Occupation (for Individual)

Self-Employed

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

10 / 19 / 2018

Transaction ID : VTQZWHG47E9

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**C. Cook, Gary, , ,**

Mailing Address 4230 Greenlee Ave

City

Cincinnati

State

OH

Zip Code

45217-1842

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary  
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

11 / 21 / 2018

Transaction ID : VTQZWHGE4M9

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Non-Contribution Account

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

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

1050.00

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

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

FOR LINE NUMBER: PAGE 48 OF 313

(check only one)

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Cotter, Justina, , ,**

Mailing Address 291 N Brumby Pl

City  
Tucson

State  
AZ

Zip Code  
85748-9201

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 ▼

1000.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG5960**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Non-Contribution Account

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

**B. Cotton, Betsy, , ,**

Mailing Address 65 Evergreen Ln

City  
Berkeley

State  
CA

Zip Code  
94705-1438

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Close the Gap CA

Occupation (for Individual)  
Nonprofit Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

**10 / 26 / 2018**

**Transaction ID : VTQZWHG7FS7**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

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

**C. Coward, Delbert, , ,**

Mailing Address 23218 133rd Ave

City  
Laurelton

State  
NY

Zip Code  
11413-1823

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Not Employed

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**11 / 21 / 2018**

**Transaction ID : VTQZWHGD4N8**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

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

1750.00



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

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

FOR LINE NUMBER: PAGE 49 OF 313

(check only one)

<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)

ColorOfChange PAC

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

A. Crabtree, Meg, , ,

Mailing Address 3732 Elm Ave

City  
Long BeachState  
CAZip Code  
90807-3402FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Designory

Occupation (for Individual)

Creative Director

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
10		26		2018

Transaction ID : VTQZWHG78J6

Amount of Each Receipt this Period

35.00

☐ Memo Item

Non-Contribution Account

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

B. Crittenden, Elizabeth, , ,

Mailing Address 1623 Webster St NE

City  
WashingtonState  
DCZip Code  
20017-3146FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self

Occupation (for Individual)

consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		21		2018

Transaction ID : VTQZWHGCR73

Amount of Each Receipt this Period

300.00

☐ Memo Item

Non-Contribution Account

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

C. Culp, Pamela, , ,

Mailing Address 130 Skyview Cir

City  
AshevilleState  
NCZip Code  
28804-2762FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Not employed

Occupation (for Individual)

Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : VTQZWHG8X07

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

435.00

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

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

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

FOR LINE NUMBER: PAGE 50 OF 313

(check only one)

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Culp, Pamela, , ,**

Mailing Address 130 Skyview Cir

City  
Asheville

State  
NC

Zip Code  
28804-2762

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Not employed

Occupation (for Individual)

Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

**11 / 21 / 2018**

**Transaction ID : VTQZWHGBRD1**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**B. Cunningham, Joanne, , ,**

Mailing Address 58 Everett St

City  
Sherborn

State  
MA

Zip Code  
01770-1526

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

**10 / 26 / 2018**

**Transaction ID : VTQZWHG6W66**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**C. Curtis, Katherine, , ,**

Mailing Address 4809 60th St

City  
San Diego

State  
CA

Zip Code  
92115-3804

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Ocean Associates Inc

Occupation (for Individual)

Scientist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

**10 / 26 / 2018**

**Transaction ID : VTQZWHG6KD2**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Non-Contribution Account

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

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

1200.00

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

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

FOR LINE NUMBER: PAGE 51 OF 313

(check only one)

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Curtis, Susan, , ,**

Mailing Address 1842 Spaight St

City  
Madison

State  
WI

Zip Code  
53704-5547

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG36Q0**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**B. Curtis, Susan, , ,**

Mailing Address 1842 Spaight St

City  
Madison

State  
WI

Zip Code  
53704-5547

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

**10** / **26** / **2018**

**Transaction ID : VTQZWHG6ZM3**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**C. Dabek, Nina, , ,**

Mailing Address 119 Mill Ln

City  
Amherst

State  
MA

Zip Code  
01002-2931

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

none

Occupation (for Individual)

none

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

**11** / **21** / **2018**

**Transaction ID : VTQZWHGD428**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

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

225.00

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

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

FOR LINE NUMBER: PAGE 52 OF 313

(check only one)

<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)

ColorOfChange PAC

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

A. **Daglas, Andrew, , ,**

Mailing Address 525 W Deming Pl

City  
ChicagoState  
ILZip Code  
60614-5973FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1160.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

Transaction ID : VTQZWHG31X6

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

B. **Daglas, Andrew, , ,**

Mailing Address 525 W Deming Pl

City  
ChicagoState  
ILZip Code  
60614-5973FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1160.00

Date of Receipt

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

Transaction ID : VTQZWHG7YD4

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Non-Contribution Account

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

C. **Dahl, Lynda, , ,**

Mailing Address 5702 Windmill Dr

City  
White Bear TownshipState  
MNZip Code  
55110-2284FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

287.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2018

Transaction ID : VTQZWHG6TF4

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

1110.00

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

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Dahl, Lynda, , ,**

Mailing Address 5702 Windmill Dr

City

White Bear Township

State

MN

Zip Code

55110-2284

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Self

Occupation (for Individual)

Actress

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.00

Date of Receipt

**11 / 02 / 2018**

**Transaction ID : VTQZWHG87K9**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B. Dahl, Lynda, , ,**

Mailing Address 5702 Windmill Dr

City

White Bear Township

State

MN

Zip Code

55110-2284

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Self

Occupation (for Individual)

Actress

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.00

Date of Receipt

**11 / 16 / 2018**

**Transaction ID : VTQZWHG96N1**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C. Dahl, Lynda, , ,**

Mailing Address 5702 Windmill Dr

City

White Bear Township

State

MN

Zip Code

55110-2284

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Self

Occupation (for Individual)

Actress

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

287.00

Date of Receipt

**11 / 21 / 2018**

**Transaction ID : VTQZWHGBN02**

Amount of Each Receipt this Period

27.00

☐ Memo Item

Non-Contribution Account

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

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

127.00

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

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

FOR LINE NUMBER: PAGE 54 OF 313

(check only one)

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Daniels, Beth, , ,**

Mailing Address 3224 E 51st St

City  
Minneapolis

State  
MN

Zip Code  
55417-1443

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Beth H. Daniels Consulting

Occupation (for Individual)

Educator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

**10 / 26 / 2018**

**Transaction ID : VTQZWHG6EK0**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

**B. Daniels, Beth, , ,**

Mailing Address 3224 E 51st St

City  
Minneapolis

State  
MN

Zip Code  
55417-1443

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Beth H. Daniels Consulting

Occupation (for Individual)

Educator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

**11 / 09 / 2018**

**Transaction ID : VTQZWHG8D20**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

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

**C. Dans, Ronald, , ,**

Mailing Address 200 Sunnyslope St

City  
Santa Fe

State  
NM

Zip Code  
87501

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

355.00

Date of Receipt

**11 / 09 / 2018**

**Transaction ID : VTQZWHG8CX0**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

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

55.00

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

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

FOR LINE NUMBER: PAGE 55 OF 313

(check only one)

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Dans, Ronald, , ,**

Mailing Address 200 Sunnyslope St

City  
Santa Fe

State  
NM

Zip Code  
87501

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 21 / 2018

**Transaction ID : VTQZWHG9R45**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**B. Davidson, Emily, , ,**

Mailing Address 2 Grace Ct  
Apt 2A

City  
Brooklyn Hgts

State  
NY

Zip Code  
11201-4150

FEC ID number of contributing  
federal political committee.

C

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

Occupation (for Individual)  
College Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG2KN3**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**C. Davidson, Emily, , ,**

Mailing Address 2 Grace Ct  
Apt 2A

City  
Brooklyn Hgts

State  
NY

Zip Code  
11201-4150

FEC ID number of contributing  
federal political committee.

C

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

Occupation (for Individual)  
College Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

375.00

Date of Receipt

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

**Transaction ID : VTQZWHG8CT7**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

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

225.00

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

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

FOR LINE NUMBER: PAGE 56 OF 313

(check only one)

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Davis, Kevin, , ,**

Mailing Address 4429 Piedmont Ave  
Unit 2

City  
Oakland

State  
CA

Zip Code  
94611-4218

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Rebound Technologies

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

11 / 21 / 2018

**Transaction ID : VTQZWHG9DS8**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

**B. Dawson, Patricia, , ,**

Mailing Address 1178 Harvard Ave E  
Ste 1

City  
Seattle

State  
WA

Zip Code  
98102-4395

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Swedish Cancer Institute Seattle

Occupation (for Individual)  
Surgeon

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 21 / 2018

**Transaction ID : VTQZWHGBG02**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C. Dean, Alica, , ,**

Mailing Address 1880 Century Park E

City  
Los Angeles

State  
CA

Zip Code  
90067-1600

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
None

Occupation (for Individual)  
Self - employeeed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 26 / 2018

**Transaction ID : VTQZWHG6F84**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

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

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

800.00



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

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

FOR LINE NUMBER: PAGE 57 OF 313

(check only one)

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. DEBERRY, FRED & MARILYNN, , ,**

Mailing Address 1132 Edgemont Rd

City  
Greensboro

State  
NC

Zip Code  
27406-7707

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
DeBerry's Realty Inc

Occupation (for Individual)  
Realtor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

**11 / 02 / 2018**

**Transaction ID : VTQZWHG89E6**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**B. DeRose, Jesse, , ,**

Mailing Address 3828 17th St

City  
San Francisco

State  
CA

Zip Code  
94114-2008

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Capital One

Occupation (for Individual)  
Operations Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**11 / 21 / 2018**

**Transaction ID : VTQZWHGDJ37**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

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

**C. Dillard, Hazel, , ,**

Mailing Address 4620 Oakland Blvd NW

City  
Roanoke

State  
VA

Zip Code  
24012-2533

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Not Employed

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG2ZW4**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

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

550.00

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

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

FOR LINE NUMBER: PAGE 58 OF 313

(check only one)

<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)

ColorOfChange PAC

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

A. Dillard, Hazel, , ,

Mailing Address 4620 Oakland Blvd NW

City

Roanoke

State

VA

Zip Code

24012-2533

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

Transaction ID : VTQZWHG3QT9

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

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

B. Dillard, Hazel, , ,

Mailing Address 4620 Oakland Blvd NW

City

Roanoke

State

VA

Zip Code

24012-2533

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

Transaction ID : VTQZWHG6041

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

C. Dillard, Hazel, , ,

Mailing Address 4620 Oakland Blvd NW

City

Roanoke

State

VA

Zip Code

24012-2533

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2018

Transaction ID : VTQZWHG6D31

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

120.00

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

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

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

FOR LINE NUMBER: PAGE 59 OF 313

(check only one)

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Dillard, Hazel, , ,**

Mailing Address 4620 Oakland Blvd NW

City  
Roanoke

State  
VA

Zip Code  
24012-2533

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

**11 / 21 / 2018**

**Transaction ID : VTQZWHGC5R6**

Amount of Each Receipt this Period

30.00

☐ Memo Item

Non-Contribution Account

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

**B. Donnelly, Eileen, , ,**

Mailing Address 422 Cleveland Ave

City

Santa Cruz

State  
CA

Zip Code  
95060-3510

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Santa Cruz Health Centers

Occupation (for Individual)  
Physician Assistant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

**11 / 09 / 2018**

**Transaction ID : VTQZWHG8TP4**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**C. Donnelly, Eileen, , ,**

Mailing Address 422 Cleveland Ave

City

Santa Cruz

State  
CA

Zip Code  
95060-3510

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Santa Cruz Health Centers

Occupation (for Individual)  
Physician Assistant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

**11 / 21 / 2018**

**Transaction ID : VTQZWHGE764**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

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

180.00

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

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

FOR LINE NUMBER: PAGE 60 OF 313

(check only one)

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Duane, Elizabeth, , ,**

Mailing Address 62 E Broadway

City  
Roslyn

State  
NY

Zip Code  
11576-2139

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 26 / 2018

**Transaction ID : VTQZWHG7DP9**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**B. Duane, Elizabeth, , ,**

Mailing Address 62 E Broadway

City  
Roslyn

State  
NY

Zip Code  
11576-2139

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

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

**Transaction ID : VTQZWHG8Z28**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**C. Duane, Elizabeth, , ,**

Mailing Address 62 E Broadway

City  
Roslyn

State  
NY

Zip Code  
11576-2139

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 21 / 2018

**Transaction ID : VTQZWHGCMW9**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

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

300.00

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

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

FOR LINE NUMBER: PAGE 61 OF 313

(check only one)

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Edwards, Jon, , ,**

Mailing Address PO Box 715

City

South Freeport

State

ME

Zip Code

04078-0715

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 ▼

810.00

Date of Receipt

11 / 09 / 2018

**Transaction ID : VTQZWHG8JH8**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

**B. Edwards, Jon, , ,**

Mailing Address PO Box 715

City

South Freeport

State

ME

Zip Code

04078-0715

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 ▼

810.00

Date of Receipt

11 / 09 / 2018

**Transaction ID : VTQZWHG90Y0**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

**C. Edwards, Jon, , ,**

Mailing Address PO Box 715

City

South Freeport

State

ME

Zip Code

04078-0715

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 ▼

810.00

Date of Receipt

11 / 21 / 2018

**Transaction ID : VTQZWHGD946**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

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

600.00

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

FOR LINE NUMBER: PAGE 62 OF 313

(check only one)

<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)

ColorOfChange PAC

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

**A. Ehret, Joanne, , ,**

Mailing Address PO Box 1444

City

Belchertown

State

MA

Zip Code

01007-1444

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self

Occupation (for Individual)

Licensed Acupuncturist

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

Transaction ID : VTQZWHG5E84

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**B. Eisner, Avram, , ,**

Mailing Address 3026 Beacon Ave S

City

Seattle

State

WA

Zip Code

98144-5815

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

FLEXE Inc.

Occupation (for Individual)

Web Developer

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

405.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

Transaction ID : VTQZWHG2QR6

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

**C. Eisner, Avram, , ,**

Mailing Address 3026 Beacon Ave S

City

Seattle

State

WA

Zip Code

98144-5815

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

FLEXE Inc.

Occupation (for Individual)

Web Developer

Receipt For:

☐ Primary  
☐ Other (specify)

General

Aggregate Year-to-Date ▼

405.00

Date of Receipt

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

Transaction ID : VTQZWHG9290

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

135.00

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

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

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

FOR LINE NUMBER: PAGE 63 OF 313

(check only one)

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Eke, Therese, , ,**

Mailing Address 47 Point Beach Dr

City  
Milford

State  
CT

Zip Code  
06460-7642

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG69S5**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**B. Ewing, William, , ,**

Mailing Address 510 E Mount Pleasant Ave

City  
Philadelphia

State  
PA

Zip Code  
19119-1232

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 ▼

350.00

Date of Receipt

**11** / **21** / **2018**

**Transaction ID : VTQZWHGAND6**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**C. Fabulously Vegan**

Mailing Address Address Requested

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 ▼

500.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG2422**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

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

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

700.00

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

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

FOR LINE NUMBER: PAGE 64 OF 313

(check only one)

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Favor, Robin, , ,**

Mailing Address 4 Poplar Pl

City  
La Grange

State  
IL

Zip Code  
60525-5831

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Surgeon

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

10 / 19 / 2018

**Transaction ID : VTQZWHG4WB1**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**B. Finkelstein, Eliza, , ,**

Mailing Address 2910 Avalon Ave

City  
Berkeley

State  
CA

Zip Code  
94705-1402

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Education

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

10 / 19 / 2018

**Transaction ID : VTQZWHG4XM3**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

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

**C. Fite, Austin, , ,**

Mailing Address 1474 Paseo De Oro

City  
Pacific Palisades

State  
CA

Zip Code  
90272-1961

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

healthcare partners

Occupation (for Individual)

physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 19 / 2018

**Transaction ID : VTQZWHG2BT4**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

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

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

1025.00



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

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

FOR LINE NUMBER: PAGE 65 OF 313

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Fitzsimons, Colleen, , ,**

Mailing Address 255 41st St  
Apt 1

City  
Oakland

State  
CA

Zip Code  
94611-5627

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Urban Fabrick

Occupation (for Individual)  
Project Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 26 / 2018

**Transaction ID : VTQZWHG6W17**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

**B. Fix, Allan, , ,**

Mailing Address 1815 Highland Pl

City  
Berkeley

State  
CA

Zip Code  
94709-1009

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
none

Occupation (for Individual)  
none

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1125.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG5FV5**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C. Fix, Allan, , ,**

Mailing Address 1815 Highland Pl

City  
Berkeley

State  
CA

Zip Code  
94709-1009

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
none

Occupation (for Individual)  
none

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1125.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG5FX1**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

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

110.00

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

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

FOR LINE NUMBER: PAGE 66 OF 313

(check only one)

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Fix, Allan, , ,**

Mailing Address 1815 Highland Pl

City  
Berkeley

State  
CA

Zip Code  
94709-1009

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
none

Occupation (for Individual)  
none

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1125.00

Date of Receipt

**10 / 26 / 2018**

**Transaction ID : VTQZWHG7F17**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

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

**B. Fix, Allan, , ,**

Mailing Address 1815 Highland Pl

City  
Berkeley

State  
CA

Zip Code  
94709-1009

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
none

Occupation (for Individual)  
none

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1125.00

Date of Receipt

**10 / 26 / 2018**

**Transaction ID : VTQZWHG7VN1**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

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

**c. Floyd-Carroll, Colleen, , ,**

Mailing Address 157 Pelham Rd

City  
Philadelphia

State  
PA

Zip Code  
19119-2661

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Self

Occupation (for Individual)  
Real Estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**11 / 21 / 2018**

**Transaction ID : VTQZWHGE0F1**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

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

1250.00

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

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

FOR LINE NUMBER: PAGE 67 OF 313

(check only one)

<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)

ColorOfChange PAC

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

A. Foldy, Erica, , ,

Mailing Address 44 Grove Rd

City  
NatickState  
MAZip Code  
01760-2337FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
New York UniversityOccupation (for Individual)  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2018

Transaction ID : VTQZWHG6HH0

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

B. Foldy, Erica, , ,

Mailing Address 44 Grove Rd

City  
NatickState  
MAZip Code  
01760-2337FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
New York UniversityOccupation (for Individual)  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2018

Transaction ID : VTQZWHG6HN2

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

C. Foldy, Erica, , ,

Mailing Address 44 Grove Rd

City  
NatickState  
MAZip Code  
01760-2337FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
New York UniversityOccupation (for Individual)  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		21		2018

Transaction ID : VTQZWHGBDG2

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

120.00

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

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

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

FOR LINE NUMBER: PAGE 68 OF 313

(check only one)

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Ford, Diane, , ,**

Mailing Address 5509 Bootjack Dr

City  
Frederick

State  
MD

Zip Code  
21702-2305

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Jen-John INC

Occupation (for Individual)  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**11** / **21** / **2018**

**Transaction ID : VTQZWHGC165**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

**B. Forster, Barbara, , ,**

Mailing Address 901 S S 2nd St  
# 603

City  
Minneapolis

State  
MN

Zip Code  
55415-1201

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 ▼

1000.00

Date of Receipt

**11** / **21** / **2018**

**Transaction ID : VTQZWHG9RD6**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Non-Contribution Account

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

**C. Forster, Barbara, , ,**

Mailing Address 901 S 2nd St

City  
Minneapolis

State  
MN

Zip Code  
55415-1289

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Not Employed

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**11** / **21** / **2018**

**Transaction ID : VTQZWHGCJQ6**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

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

1500.00

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

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

FOR LINE NUMBER: PAGE 69 OF 313

(check only one)

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Fortunak, Sharon, , ,**

Mailing Address 825 Berry St  
Apt 107

City  
Saint Paul

State  
MN

Zip Code  
55114-1168

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Teachers on Call

Occupation (for Individual)  
substitute teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2030.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 26 / 2018

**Transaction ID : VTQZWHG7K82**

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Non-Contribution Account

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

**B. Fox, Suzanne, , ,**

Mailing Address 935 31st Ave S

City  
Seattle

State  
WA

Zip Code  
98144-3212

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
The Northwest School

Occupation (for Individual)  
Librarian

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG5RY0**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**C. Fox, Suzanne, , ,**

Mailing Address 935 31st Ave S

City  
Seattle

State  
WA

Zip Code  
98144-3212

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
The Northwest School

Occupation (for Individual)  
Librarian

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 26 / 2018

**Transaction ID : VTQZWHG6VJ8**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

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

2200.00

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

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

FOR LINE NUMBER: PAGE 70 OF 313  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Frank, Sarah, , ,**

Mailing Address 113 W 122nd St  
Apt 3

City  
New York

State  
NY

Zip Code  
10027-5506

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NYC DOE

Occupation (for Individual)  
Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 21 / 2018

**Transaction ID : VTQZWHGB9R6**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

**B. Frazier, Tasha, , ,**

Mailing Address 2391 Cresthaven St

City  
Milpitas

State  
CA

Zip Code  
95035-7811

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Ibm

Occupation (for Individual)  
Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG2WH1**

Amount of Each Receipt this Period

12.00

☐ Memo Item

Non-Contribution Account

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

**C. Frazier, Tasha, , ,**

Mailing Address 2391 Cresthaven St

City  
Milpitas

State  
CA

Zip Code  
95035-7811

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Ibm

Occupation (for Individual)  
Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 26 / 2018

**Transaction ID : VTQZWHG7JX5**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

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

272.00

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

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

FOR LINE NUMBER: PAGE 71 OF 313

(check only one)

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Frazier, Tasha, , ,**

Mailing Address 2391 Cresthaven St

City  
Milpitas

State  
CA

Zip Code  
95035-7811

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Ibm

Occupation (for Individual)

Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

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

**Transaction ID : VTQZWHG9130**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B. Frazier, Tasha, , ,**

Mailing Address 2391 Cresthaven St

City  
Milpitas

State  
CA

Zip Code  
95035-7811

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Ibm

Occupation (for Individual)

Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 21 / 2018

**Transaction ID : VTQZWHGAA50**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**C. Fulton, Michael, , ,**

Mailing Address 13347 W Alameda Pkwy

City  
Lakewood

State  
CO

Zip Code  
80228-3437

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Western Mechanical

Occupation (for Individual)

Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG5511**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

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

250.00

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

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

FOR LINE NUMBER: PAGE 72 OF 313

(check only one)

<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)

ColorOfChange PAC

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

A. Fulton, Michael, , ,

Mailing Address 13347 W Alameda Pkwy

City  
LakewoodState  
COZip Code  
80228-3437FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Western MechanicalOccupation (for Individual)  
Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

Transaction ID : VTQZWHG6A34

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

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

B. Fulton, Michael, , ,

Mailing Address 13347 W Alameda Pkwy

City  
LakewoodState  
COZip Code  
80228-3437FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Western MechanicalOccupation (for Individual)  
Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		21		2018

Transaction ID : VTQZWHGAMB0

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

C. Gaspard, Charlotte, , ,

Mailing Address 75 Hudson Ave

City  
BrooklynState  
NYZip Code  
11201-1221FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

800.00

Date of Receipt

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

Transaction ID : VTQZWHG8J20

Amount of Each Receipt this Period

800.00

☐ Memo Item

Non-Contribution Account

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

1400.00

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



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

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

FOR LINE NUMBER: PAGE 73 OF 313

(check only one)

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Gelman, Emmaia, , ,**

Mailing Address 39 W 105th St  
Apt 4

City  
New York

State  
NY

Zip Code  
10025-4058

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NYU

Occupation (for Individual)  
Grad student

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

MM / DD / YYYY  
10 / 19 / 2018

**Transaction ID : VTQZWHG5655**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

**B. Gelman, Emmaia, , ,**

Mailing Address 39 W 105th St  
Apt 4

City  
New York

State  
NY

Zip Code  
10025-4058

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NYU

Occupation (for Individual)  
Grad student

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

MM / DD / YYYY  
10 / 19 / 2018

**Transaction ID : VTQZWHG5663**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

**C. Gelman, Emmaia, , ,**

Mailing Address 39 W 105th St  
Apt 4

City  
New York

State  
NY

Zip Code  
10025-4058

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NYU

Occupation (for Individual)  
Grad student

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

MM / DD / YYYY  
11 / 21 / 2018

**Transaction ID : VTQZWHG99Q3**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

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

30.00

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

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

FOR LINE NUMBER: PAGE 74 OF 313

(check only one)

<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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Gelman, Emmaia, , ,

Mailing Address 39 W 105th St  
Apt 4City  
New YorkState  
NYZip Code  
10025-4058FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NYUOccupation (for Individual)  
Grad student

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2018

Transaction ID : VTQZWHG99R1

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

B. Gibney, Kathryn, , ,

Mailing Address 115 Professional Center Pkwy

City

San Rafael

State  
CAZip Code  
94903-2751FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2018

Transaction ID : VTQZWHGDPZ5

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

C. Ginsburg, Kare, , ,

Mailing Address 121 Llanfair Rd

City

Ardmore

State  
PAZip Code  
19003-3341FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SelfOccupation (for Individual)  
Clinical social worker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2018

Transaction ID : VTQZWHG2533

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

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

510.00

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

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

FOR LINE NUMBER: PAGE 75 OF 313

(check only one)

<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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Girling, Richard, , ,

Mailing Address 182 Banks St

City

San Francisco

State

CA

Zip Code

94110-5623

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

Transaction ID : VTQZWHG2XN5

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

B. Girling, Richard, , ,

Mailing Address 182 Banks St

City

San Francisco

State

CA

Zip Code

94110-5623

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		21		2018

Transaction ID : VTQZWHGB5W9

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

C. Gittins, John, , ,

Mailing Address 5 Bell St

City

North Brookfield

State

MA

Zip Code

01535-1503

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary  
☐ Other (specify)

General

Aggregate Year-to-Date ▼

367.10

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

Transaction ID : VTQZWHG28C0

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

160.00

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

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

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

FOR LINE NUMBER: PAGE 76 OF 313

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Gittins, John, , ,**

Mailing Address 5 Bell St

City

North Brookfield

State

MA

Zip Code

01535-1503

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

367.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG3HD3**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B. Gittins, John, , ,**

Mailing Address 5 Bell St

City

North Brookfield

State

MA

Zip Code

01535-1503

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

367.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG5798**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

**C. Gittins, John, , ,**

Mailing Address 5 Bell St

City

North Brookfield

State

MA

Zip Code

01535-1503

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary  
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

367.10

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG5BH9**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

70.00

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

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

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

FOR LINE NUMBER: PAGE 77 OF 313

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Gittins, John, , ,**

Mailing Address 5 Bell St

City

North Brookfield

State

MA

Zip Code

01535-1503

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

367.10

Date of Receipt

**10 / 26 / 2018**

**Transaction ID : VTQZWHG7H70**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

**B. Gittins, John, , ,**

Mailing Address 5 Bell St

City

North Brookfield

State

MA

Zip Code

01535-1503

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

367.10

Date of Receipt

**11 / 09 / 2018**

**Transaction ID : VTQZWHG8JW5**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

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

**C. Gittins, John, , ,**

Mailing Address 5 Bell St

City

North Brookfield

State

MA

Zip Code

01535-1503

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

367.10

Date of Receipt

**11 / 21 / 2018**

**Transaction ID : VTQZWHGDH91**

Amount of Each Receipt this Period

15.00

☐ Memo Item

Non-Contribution Account

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

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

45.00

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

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

FOR LINE NUMBER: PAGE 78 OF 313

(check only one)

<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

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Gjertsen, Margaret, , ,

Mailing Address 3347 Ridgecrest Ct

City  
RaleighState  
NCZip Code  
27607-6764FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/AOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2018

Transaction ID : VTQZWHG7T27

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

B. Gjertsen, Margaret, , ,

Mailing Address 3347 Ridgecrest Ct

City  
RaleighState  
NCZip Code  
27607-6764FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/AOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

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

Transaction ID : VTQZWHG8828

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

C. Gochman, Molly, , ,

Mailing Address PO Box 540205

City  
HoustonState  
TXZip Code  
77254-0205FEC ID number of contributing  
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2018

Transaction ID : VTQZWHGEP74

Amount of Each Receipt this Period

20000.00

☐ Memo Item

Non-Contribution Account

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

20035.00

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

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

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

FOR LINE NUMBER: PAGE 79 OF 313

(check only one)

<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)

ColorOfChange PAC

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

A. Gochman, Molly, , ,

Mailing Address PO Box 540205

City  
HoustonState  
TXZip Code  
77254-0205FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Artist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2018

Transaction ID : VTQZWHGEP82

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Non-Contribution Account

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

B. Goldstein, Laurie, , ,

Mailing Address 822 Prairie Ave

City  
WilmetteState  
ILZip Code  
60091-2536FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Reiki Therapist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		21		2018

Transaction ID : VTQZWHGCK15

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

C. Goldstein, Scott, , ,

Mailing Address 2252 Ontario Rd NW

City  
WashingtonState  
DCZip Code  
20009-2607FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Tremendousness

Occupation (for Individual)

Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : VTQZWHG7ZM2

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

5075.00

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

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

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

FOR LINE NUMBER: PAGE 80 OF 313

(check only one)

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Goodman, David, , ,**

Mailing Address 10 Mountainview Rd

City  
Upper Saddle River

State  
NJ

Zip Code  
07458-1933

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG52T2**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Non-Contribution Account

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

**B. Goodman, David, , ,**

Mailing Address 10 Mountainview Rd

City  
Upper Saddle River

State  
NJ

Zip Code  
07458-1933

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

**10 / 26 / 2018**

**Transaction ID : VTQZWHG6R35**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Non-Contribution Account

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

**C. Goodman, Nancy, , ,**

Mailing Address 12 Calebs Ln

City  
Rockport

State  
MA

Zip Code  
01966-1704

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Gloucester Public Schools

Occupation (for Individual)  
Counselor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

633.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG4216**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

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

2100.00



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

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

FOR LINE NUMBER: PAGE 81 OF 313

(check only one)

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Goodman, Nancy, , ,**

Mailing Address 12 Calebs Ln

City  
Rockport

State  
MA

Zip Code  
01966-1704

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Gloucester Public Schools

Occupation (for Individual)  
Counselor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

633.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG4NT4**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

**B. Goodman, Nancy, , ,**

Mailing Address 12 Calebs Ln

City  
Rockport

State  
MA

Zip Code  
01966-1704

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Gloucester Public Schools

Occupation (for Individual)  
Counselor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

633.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG5EQ3**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C. Goodman, Nancy, , ,**

Mailing Address 12 Calebs Ln

City  
Rockport

State  
MA

Zip Code  
01966-1704

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Gloucester Public Schools

Occupation (for Individual)  
Counselor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

633.00

Date of Receipt

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

**Transaction ID : VTQZWHG8VD6**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

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

70.00

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

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

FOR LINE NUMBER: PAGE 82 OF 313

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Goodman, Nancy, , ,**

Mailing Address 12 Calebs Ln

City  
Rockport

State  
MA

Zip Code  
01966-1704

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Gloucester Public Schools

Occupation (for Individual)  
Counselor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

633.00

Date of Receipt

**11** / **21** / **2018**

**Transaction ID : VTQZWHGA0W1**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**B. Gould, Diana, , ,**

Mailing Address 14709 Bestor Blvd

City  
Pacific Palisades

State  
CA

Zip Code  
90272-2613

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 ▼

220.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG2CX1**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

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

**C. Gould, Diana, , ,**

Mailing Address 14709 Bestor Blvd

City  
Pacific Palisades

State  
CA

Zip Code  
90272-2613

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 ▼

220.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG32Y6**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

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

170.00

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

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

FOR LINE NUMBER: PAGE 83 OF 313

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Gould, Diana, , ,**

Mailing Address 14709 Bestor Blvd

City  
Pacific Palisades

State  
CA

Zip Code  
90272-2613

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 ▼

220.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG5HY5**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

**B. Gould, Diana, , ,**

Mailing Address 14709 Bestor Blvd

City  
Pacific Palisades

State  
CA

Zip Code  
90272-2613

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 ▼

220.00

Date of Receipt

**11 / 02 / 2018**

**Transaction ID : VTQZWHG82B7**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

**C. Gould, Diana, , ,**

Mailing Address 14709 Bestor Blvd

City  
Pacific Palisades

State  
CA

Zip Code  
90272-2613

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 ▼

220.00

Date of Receipt

**11 / 21 / 2018**

**Transaction ID : VTQZWHGE7B4**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

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

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

40.00

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

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

FOR LINE NUMBER: PAGE 84 OF 313

(check only one)

<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)

ColorOfChange PAC

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

A. Graham, Stephen, , ,

Mailing Address 1191 2nd Ave  
FI 10City  
SeattleState  
WAZip Code  
98101-3438FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Fenwick &amp; West

Occupation (for Individual)

Attorney

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
11	/	21	/	2018

Transaction ID : VTQZWHGBCC8

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

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

B. Gray, John, , ,

Mailing Address 176 Kane St

City

Brooklyn

State

NY

Zip Code

11231-3760

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2018

Transaction ID : VTQZWHG6NQ5

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

C. Greenebaum, Steven, , ,

Mailing Address 4224 184th St SW

City

Lynnwood

State

WA

Zip Code

98037-3726

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

none

Occupation (for Individual)

Minister

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2018

Transaction ID : VTQZWHG2HH8

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

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

775.00

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

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

FOR LINE NUMBER: PAGE 85 OF 313

(check only one)

<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)

ColorOfChange PAC

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

A. Gregg, Gail, , ,

Mailing Address 1 W 64th St

Apt 9A

City

New York

State

NY

Zip Code

10023-6745

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Artist/Writer

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

Transaction ID : VTQZWHG2DE5

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

B. Guthman, Julie, , ,

Mailing Address 2515 Derby St

City

Berkeley

State

CA

Zip Code

94705-1203

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

University of California Santa Cruz

Occupation (for Individual)

Professor

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

Transaction ID : VTQZWHG5ZF5

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

C. Haas, Carola, , ,

Mailing Address 4462 Sidney Church Rd

City

Riner

State

VA

Zip Code

24149-1714

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Virginia Tech

Occupation (for Individual)

Professor

Receipt For:

☐ Primary  
☐ Other (specify)

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

Transaction ID : VTQZWHG67R5

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

750.00

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

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 86 OF 313

(check only one)

<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
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

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

A. Haas, Colleen, , ,

Mailing Address 69 Crecienta Dr

City  
SausalitoState  
CAZip Code  
94965-1882FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

Transaction ID : VTQZWHG2VX3

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

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

B. Haas, Colleen, , ,

Mailing Address 69 Crecienta Dr

City  
SausalitoState  
CAZip Code  
94965-1882FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

Transaction ID : VTQZWHG3WP9

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Non-Contribution Account

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

C. Haas, Colleen, , ,

Mailing Address 69 Crecienta Dr

City  
SausalitoState  
CAZip Code  
94965-1882FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

Transaction ID : VTQZWHG5GF3

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

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

2000.00

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

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

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

FOR LINE NUMBER: PAGE 87 OF 313

(check only one)

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Haas, Colleen, , ,**

Mailing Address 69 Crecienta Dr

City  
Sausalito

State  
CA

Zip Code  
94965-1882

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7850.00

Date of Receipt

**10 / 26 / 2018**

**Transaction ID : VTQZWHG6CX3**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

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

**B. Haas, Colleen, , ,**

Mailing Address 69 Crecienta Dr

City  
Sausalito

State  
CA

Zip Code  
94965-1882

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7850.00

Date of Receipt

**10 / 26 / 2018**

**Transaction ID : VTQZWHG6FP4**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**C. Haas, Colleen, , ,**

Mailing Address 69 Crecienta Dr

City  
Sausalito

State  
CA

Zip Code  
94965-1882

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7850.00

Date of Receipt

**11 / 09 / 2018**

**Transaction ID : VTQZWHG92J1**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

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

850.00

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

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

FOR LINE NUMBER: PAGE 88 OF 313

(check only one)

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Haas, Colleen, , ,**

Mailing Address 69 Crecienta Dr

City  
Sausalito

State  
CA

Zip Code  
94965-1882

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7850.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 21 / 2018

**Transaction ID : VTQZWHGAGN0**

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Non-Contribution Account

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

**B. Halperin, Jason, , ,**

Mailing Address 1115 Thalia St

City  
New Orleans

State  
LA

Zip Code  
70130-4229

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
New York University

Occupation (for Individual)  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

**Transaction ID : VTQZWHG8810**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**C. Halstead, Cathy, , ,**

Mailing Address 2448 31st Ave W

City  
Seattle

State  
WA

Zip Code  
98199-3334

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
self

Occupation (for Individual)  
philanthropist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG5HZ2**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

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

2275.00



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

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

FOR LINE NUMBER: PAGE 89 OF 313

(check only one)

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Hamilton, Judy, , ,**

Mailing Address 137 Stanwood Ln

City  
Manlius

State  
NY

Zip Code  
13104-1411

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 ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG62G0**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

**B. Hancock, Barbara, , ,**

Mailing Address 1213 Route 23A

City  
Catskill

State  
NY

Zip Code  
12414-6604

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG5N80**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**C. Hancock, Barbara, , ,**

Mailing Address 1213 Route 23A

City  
Catskill

State  
NY

Zip Code  
12414-6604

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 26 / 2018

**Transaction ID : VTQZWHG6FY8**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

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

325.00

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

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

FOR LINE NUMBER: PAGE 90 OF 313

(check only one)

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Hanson, Walter, , ,**

Mailing Address 2364 Highland Loop

City

Port Townsend

State

WA

Zip Code

98368-5924

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
none

Occupation (for Individual)  
none

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

**10 / 26 / 2018**

**Transaction ID : VTQZWHG6ZG2**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

**B. Hanson, Walter, , ,**

Mailing Address 2364 Highland Loop

City

Port Townsend

State

WA

Zip Code

98368-5924

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
none

Occupation (for Individual)  
none

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

**11 / 02 / 2018**

**Transaction ID : VTQZWHG7ZP8**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

**C. Harris, Robert F, , ,**

Mailing Address 68 Yale Rd

City

Menlo Park

State

CA

Zip Code

94025-5335

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
self

Occupation (for Individual)  
psychiatrist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG49S1**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

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

120.00

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

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

FOR LINE NUMBER: PAGE 91 OF 313

(check only one)

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Harris, Robert F, , ,**

Mailing Address 68 Yale Rd

City  
Menlo Park

State  
CA

Zip Code  
94025-5335

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
self

Occupation (for Individual)  
psychiatrist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG4XP8**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**B. Harvey, Iris, , ,**

Mailing Address 1338 Berkshire Rd

City  
Stow

State  
OH

Zip Code  
44224-2257

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Planned Parenthood

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG5ST9**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**C. Harvey, Iris, , ,**

Mailing Address 1338 Berkshire Rd

City  
Stow

State  
OH

Zip Code  
44224-2257

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Planned Parenthood

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

475.00

Date of Receipt

**11** / **21** / **2018**

**Transaction ID : VTQZWHGCDN8**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

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

450.00

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

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

FOR LINE NUMBER: PAGE 92 OF 313

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Haskell, Adelaide, , ,**

Mailing Address 241 W 23rd St  
Apt 3A

City  
New York

State  
NY

Zip Code  
10011-2328

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

City of New York

Occupation (for Individual)

Administration

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

**Transaction ID : VTQZWHG84S1**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

**B. Hawkins, Sheila, , ,**

Mailing Address 769 Parkhaven Way

City

Sacramento

State

CA

Zip Code

95831-2626

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

none

Occupation (for Individual)

none

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG26K0**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**C. Hawkins, Sheila, , ,**

Mailing Address 769 Parkhaven Way

City

Sacramento

State

CA

Zip Code

95831-2626

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

none

Occupation (for Individual)

none

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG4X20**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

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

300.00

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Hawkins, Sheila, , ,**

Mailing Address 769 Parkhaven Way

City  
Sacramento

State  
CA

Zip Code  
95831-2626

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
none

Occupation (for Individual)  
none

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

**10 / 26 / 2018**

**Transaction ID : VTQZWHG6RA9**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**B. Hawkins, Sheila, , ,**

Mailing Address 769 Parkhaven Way

City  
Sacramento

State  
CA

Zip Code  
95831-2626

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
none

Occupation (for Individual)  
none

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

**11 / 21 / 2018**

**Transaction ID : VTQZWHGBJP0**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**C. Henle, Toni, , ,**

Mailing Address 609 N Taylor Ave

City  
Oak Park

State  
IL

Zip Code  
60302-1747

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 ▼

225.00

Date of Receipt

**11 / 09 / 2018**

**Transaction ID : VTQZWHG8M49**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

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

75.00

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

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

FOR LINE NUMBER: PAGE 94 OF 313

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Highland, Sarah, , ,**

Mailing Address 89 German Cross Rd

City  
Ithaca

State  
NY

Zip Code  
14850-6027

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
The Carpenter's Boat Shop

Occupation (for Individual)  
Instructor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.00

Date of Receipt

10 / 19 / 2018

**Transaction ID : VTQZWHG28Q5**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**B. Hines, Michele, , ,**

Mailing Address 4600 Maris Ln

City  
Louisville

State  
KY

Zip Code  
40241-5540

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 ▼

202.00

Date of Receipt

10 / 26 / 2018

**Transaction ID : VTQZWHG6MK3**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**C. Hines, Michele, , ,**

Mailing Address 4600 Maris Ln

City  
Louisville

State  
KY

Zip Code  
40241-5540

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 ▼

202.00

Date of Receipt

10 / 26 / 2018

**Transaction ID : VTQZWHG7415**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

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

135.00

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

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

FOR LINE NUMBER: PAGE 95 OF 313

(check only one)

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

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

NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Hines, Michele, , ,**

Mailing Address 4600 Maris Ln

City  
Louisville

State  
KY

Zip Code  
40241-5540

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 ▼

202.00

Date of Receipt

**11** / **21** / **2018**

**Transaction ID : VTQZWHGDPH5**

Amount of Each Receipt this Period

27.00

☐ Memo Item

Non-Contribution Account

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

**B. Hobart, Helen, , ,**

Mailing Address 410 Santa Ynez Way

City  
Sacramento

State  
CA

Zip Code  
95816-3422

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Sutter Medical Center Sacramento

Occupation (for Individual)

Chaplain

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG55F1**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

**C. Hobart, Helen, , ,**

Mailing Address 410 Santa Ynez Way

City  
Sacramento

State  
CA

Zip Code  
95816-3422

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Sutter Medical Center Sacramento

Occupation (for Individual)

Chaplain

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

330.00

Date of Receipt

**11** / **21** / **2018**

**Transaction ID : VTQZWHGA4T5**

Amount of Each Receipt this Period

30.00

☐ Memo Item

Non-Contribution Account

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

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

82.00

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

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

FOR LINE NUMBER: PAGE 96 OF 313

(check only one)

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Hollingsworth, Steven, , ,**

Mailing Address 14 N Lynncrest Dr

City  
Chattanooga

State  
TN

Zip Code  
37411-1819

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

11 / 02 / 2018

**Transaction ID : VTQZWHG8AG2**

Amount of Each Receipt this Period

900.00

☐ Memo Item

Non-Contribution Account

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

**B. Hope, Glenda, , ,**

Mailing Address 249 Niagara Ave

City

San Francisco

State

CA

Zip Code

94112-3338

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

san francisco network ministries

Occupation (for Individual)

clergy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

11 / 21 / 2018

**Transaction ID : VTQZWHGA8N3**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

**C. House, Tim, , ,**

Mailing Address 92 Elm St

City

Upton

State

MA

Zip Code

01568-1125

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

First Church Boston

Occupation (for Individual)

Clergy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

11 / 02 / 2018

**Transaction ID : VTQZWHG83Z8**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

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

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

1170.00



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

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

FOR LINE NUMBER: PAGE 97 OF 313

(check only one)

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Howells, Cynthia, , ,**

Mailing Address 518 W 111th St  
Apt 22

City  
New York

State  
NY

Zip Code  
10025-1923

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.00

Date of Receipt

10 / 19 / 2018

Transaction ID : VTQZWHG2C51

Amount of Each Receipt this Period

15.00

☐ Memo Item

Non-Contribution Account

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

**B. Howells, Cynthia, , ,**

Mailing Address 518 W 111th St  
Apt 22

City  
New York

State  
NY

Zip Code  
10025-1923

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.00

Date of Receipt

10 / 19 / 2018

Transaction ID : VTQZWHG6263

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

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

**C. Howells, Cynthia, , ,**

Mailing Address 518 W 111th St  
Apt 22

City  
New York

State  
NY

Zip Code  
10025-1923

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

238.00

Date of Receipt

11 / 21 / 2018

Transaction ID : VTQZWHGDWB2

Amount of Each Receipt this Period

15.00

☐ Memo Item

Non-Contribution Account

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

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

40.00

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

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

FOR LINE NUMBER: PAGE 98 OF 313

(check only one)

<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)

ColorOfChange PAC

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

A. Howes, Carollee, , ,

Mailing Address 803 Amoroso Pl

City  
VeniceState  
CAZip Code  
90291-3901FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Not employed

Occupation (for Individual)

Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2018

Transaction ID : VTQZWHG9ZR7

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

B. Hughes, Kimberly, , ,

Mailing Address 48 Carmelita Ave

City  
Mill ValleyState  
CAZip Code  
94941-2049FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2018

Transaction ID : VTQZWHGCPD6

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

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

C. Hummel, Faye, , ,

Mailing Address 275 S 3rd Ave

City  
BrightonState  
COZip Code  
80601-2011FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

University of Northern Colorado

Occupation (for Individual)

Nurse Professor

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
11	/	21	/	2018

Transaction ID : VTQZWHGCZ78

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

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

1250.00

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

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Jablonski, Bobby, , ,**

Mailing Address 5311 Abbott Pl

City

Los Angeles

State

CA

Zip Code

90042-3301

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

bvs

Occupation (for Individual)

exhibitions manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG2Y44**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

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

**B. Jablonski, Bobby, , ,**

Mailing Address 5311 Abbott Pl

City

Los Angeles

State

CA

Zip Code

90042-3301

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

bvs

Occupation (for Individual)

exhibitions manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG44P5**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**C. Jablonski, Bobby, , ,**

Mailing Address 5311 Abbott Pl

City

Los Angeles

State

CA

Zip Code

90042-3301

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

bvs

Occupation (for Individual)

exhibitions manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG5CF6**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

450.00

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

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

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

FOR LINE NUMBER: PAGE 100 OF 313

(check only one)

<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)

ColorOfChange PAC

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

A. Jimenez, Jaclyn, , ,

Mailing Address 320 Forest Ave

City  
ParamusState  
NJZip Code  
07652-5413FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WNETOccupation (for Individual)  
Coordinator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : VTQZWHG87V3

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

B. Jimenez, Mauricio, , ,

Mailing Address 2117 Richmond St NW

City  
Grand RapidsState  
MIZip Code  
49504-2524FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/AOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2018

Transaction ID : VTQZWHG6PV9

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

C. Jimenez, Mauricio, , ,

Mailing Address 2117 Richmond St NW

City  
Grand RapidsState  
MIZip Code  
49504-2524FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/AOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

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

Transaction ID : VTQZWHG8947

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

125.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Jimenez, Mauricio, , ,**

Mailing Address 2117 Richmond St NW

City

Grand Rapids

State

MI

Zip Code

49504-2524

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

**11** / **09** / **2018**

**Transaction ID : VTQZWHG8GM7**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**B. Jimenez, Mauricio, , ,**

Mailing Address 2117 Richmond St NW

City

Grand Rapids

State

MI

Zip Code

49504-2524

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

**11** / **21** / **2018**

**Transaction ID : VTQZWHGBAM8**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

**C. Johnson, Alice, , ,**

Mailing Address 16877 Parkside St

City

Detroit

State

MI

Zip Code

48221-3154

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

274.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG4QE2**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

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

150.00

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Johnson, Ayana, , ,**

Mailing Address 232 Cumberland St  
# 3

City  
Brooklyn

State  
NY

Zip Code  
11205-4653

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 26 / 2018

**Transaction ID : VTQZWHG6EM8**

Amount of Each Receipt this Period

30.00

☐ Memo Item

Non-Contribution Account

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

**B. Johnson, Charles, , ,**

Mailing Address 23 Ashton Ct

City  
Dallas

State  
TX

Zip Code  
75230-1977

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

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

**Transaction ID : VTQZWHG84E5**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

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

**C. Johnson, Crystal, , ,**

Mailing Address 6065 Dimm Way

City  
Richmond

State  
CA

Zip Code  
94805-1215

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG26E1**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

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

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

180.00

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

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

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

**A. Johnson, Crystal, , ,**

Mailing Address 6065 Dimm Way

City  
Richmond

State  
CA

Zip Code  
94805-1215

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

**11** / **21** / **2018**

**Transaction ID : VTQZWHGBJV9**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Johnson, Steven, , ,**

Mailing Address 1010 Grove St

City  
Charlottesville

State  
VA

Zip Code  
22903-3404

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
U. of Virginia

Occupation (for Individual)  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG5KF0**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Judkins-Fisher, Chris, , ,**

Mailing Address 1238 Spaight St  
Apt 2

City  
Madison

State  
WI

Zip Code  
53703-3749

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
DonorsChoose.org

Occupation (for Individual)  
Senior Software Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

**10** / **26** / **2018**

**Transaction ID : VTQZWHG70Z3**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1150.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Judkins-Fisher, Chris, , ,**

Mailing Address 1238 Spaight St  
Apt 2

City  
Madison

State  
WI

Zip Code  
53703-3749

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DonorsChoose.org

Occupation (for Individual)  
Senior Software Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 21 / 2018

**Transaction ID : VTQZWHGA1N9**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Kadish, William, , ,**

Mailing Address 24 Brattle St

City  
Worcester

State  
MA

Zip Code  
01606-2511

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PAREXEL

Occupation (for Individual)  
Medical Writer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG51B1**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Kadish, William, , ,**

Mailing Address 24 Brattle St

City  
Worcester

State  
MA

Zip Code  
01606-2511

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PAREXEL

Occupation (for Individual)  
Medical Writer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 09 / 2018

**Transaction ID : VTQZWHG93C5**

Amount of Each Receipt this Period

60.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

260.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Kaiser, Christy, , ,**

Mailing Address 4849 Connecticut Ave NW  
Apt 1019

City  
Washington

State  
DC

Zip Code  
20008-5848

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
medstar

Occupation (for Individual)  
doctor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG2659**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Kaiser, Christy, , ,**

Mailing Address 4849 Connecticut Ave NW  
Apt 1019

City  
Washington

State  
DC

Zip Code  
20008-5848

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
medstar

Occupation (for Individual)  
doctor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 21 / 2018

**Transaction ID : VTQZWHG9VC5**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Kaplan, Temma, , ,**

Mailing Address 146 W 80th St

City  
New York

State  
NY

Zip Code  
10024-6337

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 21 / 2018

**Transaction ID : VTQZWHG9VC5**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

150.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Katznelson, Zachary, , ,**

Mailing Address 377 1st St

City  
Brooklyn

State  
NY

Zip Code  
11215-1931

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Legal Aid Society

Occupation (for Individual)  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

**10 / 26 / 2018**

**Transaction ID : VTQZWHG6GR3**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Katznelson, Zachary, , ,**

Mailing Address 377 1st St

City  
Brooklyn

State  
NY

Zip Code  
11215-1931

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Legal Aid Society

Occupation (for Individual)  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

**11 / 09 / 2018**

**Transaction ID : VTQZWHG8N50**

Amount of Each Receipt this Period

60.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Keating, Edie, , ,**

Mailing Address 3553 Alma St  
Apt 5

City  
Palo Alto

State  
CA

Zip Code  
94306-3540

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Camico Insurance

Occupation (for Individual)  
business analyst

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

375.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG3RG2**

Amount of Each Receipt this Period

200.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

310.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Keating, Edie, , ,**

Mailing Address 3553 Alma St  
Apt 5

City  
Palo Alto

State  
CA

Zip Code  
94306-3540

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Camico Insurance

Occupation (for Individual)  
business analyst

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 21 / 2018

**Transaction ID : VTQZWHGD8P5**

Amount of Each Receipt this Period

175.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Kerwin, Sunni, , ,**

Mailing Address 66530 Paradise Aly

City  
Bend

State  
OR

Zip Code  
97703-9161

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Lawrence Stoller CrystalWorks Inc

Occupation (for Individual)  
Office Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 21 / 2018

**Transaction ID : VTQZWHGCB74**

Amount of Each Receipt this Period

108.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Ketcham, Sally, , ,**

Mailing Address 4750 39th Ave S

City  
Seattle

State  
WA

Zip Code  
98118-1620

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 ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 02 / 2018

**Transaction ID : VTQZWHG7Y19**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

333.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Ketcham, Sally, , ,**

Mailing Address 4750 39th Ave S

City  
Seattle

State  
WA

Zip Code  
98118-1620

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 ▼

340.00

Date of Receipt

**11** / **21** / **2018**

**Transaction ID : VTQZWHGCVM2**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. King, Aja, , ,**

Mailing Address 8383 Wilshire Blvd  
Ste 1000

City  
Beverly Hills

State  
CA

Zip Code  
90211-2439

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
ABC

Occupation (for Individual)  
Actor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**11** / **21** / **2018**

**Transaction ID : VTQZWHGA3T2**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Klein, Josefa, , ,**

Mailing Address 15 Harmony Hill Rd

City  
Granby

State  
CT

Zip Code  
06035-1222

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

370.00

Date of Receipt

**10** / **26** / **2018**

**Transaction ID : VTQZWHG6T63**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

600.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Klerlein, Ellie, , ,**

Mailing Address 1200 Braddock PI

City  
Alexandria

State  
VA

Zip Code  
22314-1663

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Spitfire

Occupation (for Individual)  
Communications

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG2WR6**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Knapp, Robert, , ,**

Mailing Address 3811 Pifer Rd SE

City  
Olympia

State  
WA

Zip Code  
98501-3673

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1750.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG3CF9**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Kornacker, Melodee, , ,**

Mailing Address PO Box 218207

City  
Columbus

State  
OH

Zip Code  
43221-8207

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Information Requested

Occupation (for Individual)  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**10 / 26 / 2018**

**Transaction ID : VTQZWHG24C1**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Kortekaas, Annie, , ,**

Mailing Address 10018 Westleigh Dr SE

City  
Huntsville

State  
AL

Zip Code  
35803-1645

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

**11** / **21** / **2018**

**Transaction ID : VTQZWHGE3A7**

Amount of Each Receipt this Period

300.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Krasney, Martin, , ,**

Mailing Address 122 Santa Rosa Ave

City  
Sausalito

State  
CA

Zip Code  
94965-2035

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Dalai Lama Fellows

Occupation (for Individual)

Educator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

**11** / **21** / **2018**

**Transaction ID : VTQZWHG9EV7**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Krier, Hannah, , ,**

Mailing Address 755 Burnett Ave  
Apt 2

City  
San Francisco

State  
CA

Zip Code  
94131-1411

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Square

Occupation (for Individual)

Software Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG5BW6**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

600.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Krier, Hannah, , ,**

Mailing Address 755 Burnett Ave  
Apt 2

City  
San Francisco

State  
CA

Zip Code  
94131-1411

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Square

Occupation (for Individual)  
Software Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 26 / 2018

**Transaction ID : VTQZWHG6H14**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Kyger, Nora, , ,**

Mailing Address 740 S Loomis St

City  
Chicago

State  
IL

Zip Code  
60607-4008

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TW&B

Occupation (for Individual)  
consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 26 / 2018

**Transaction ID : VTQZWHG7RG5**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Kyger, Nora, , ,**

Mailing Address 740 S Loomis St

City  
Chicago

State  
IL

Zip Code  
60607-4008

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TW&B

Occupation (for Individual)  
consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 21 / 2018

**Transaction ID : VTQZWHGD876**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

250.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Lambert, Ruth, , ,**

Mailing Address 100 York St

City  
New Haven

State  
CT

Zip Code  
06511-5620

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

**11 / 09 / 2018**

**Transaction ID : VTQZWHG8C43**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Lambert, Ruth, , ,**

Mailing Address 100 York St

City  
New Haven

State  
CT

Zip Code  
06511-5620

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

**11 / 09 / 2018**

**Transaction ID : VTQZWHG92M7**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Lee, Andrea, , ,**

Mailing Address 554 Fairbanks Ave

City  
Oakland

State  
CA

Zip Code  
94610-1616

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
self-employed

Occupation (for Individual)  
Nonprofit Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**11 / 21 / 2018**

**Transaction ID : VTQZWHGA5W0**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

310.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Leigh, Simone, , ,**

Mailing Address 104 Montgomery St  
# 2B

City  
Brooklyn

State  
NY

Zip Code  
11225-2008

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Visual Artist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1320.00

Date of Receipt

MM / DD / YYYY  
10 / 19 / 2018

**Transaction ID : VTQZWHG4YK7**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Leigh, Simone, , ,**

Mailing Address 104 Montgomery St  
# 2B

City  
Brooklyn

State  
NY

Zip Code  
11225-2008

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Visual Artist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1320.00

Date of Receipt

MM / DD / YYYY  
11 / 02 / 2018

**Transaction ID : VTQZWHG87R9**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Leigh, Simone, , ,**

Mailing Address 104 Montgomery St  
# 2B

City  
Brooklyn

State  
NY

Zip Code  
11225-2008

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Visual Artist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1320.00

Date of Receipt

MM / DD / YYYY  
11 / 16 / 2018

**Transaction ID : VTQZWHG98G7**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

200.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Leonard, Burr, , ,**

Mailing Address 1 Channing Way

City  
Sausalito

State  
CA

Zip Code  
94965-2303

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
4th Horse Fitness

Occupation (for Individual)  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG4HD2**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Levin, Cheryl, , ,**

Mailing Address 4827 Shafter Ave

City  
Oakland

State  
CA

Zip Code  
94609-2218

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Self-Employed

Occupation (for Individual)  
Designer for Interactive Media

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

**11** / **21** / **2018**

**Transaction ID : VTQZWHGAQ75**

Amount of Each Receipt this Period

30.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Levine, Joel, , ,**

Mailing Address 3780 King Ranch Rd

City  
Ukiah

State  
CA

Zip Code  
95482-9200

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

370.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG5X94**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

155.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Levine, Joel, , ,**

Mailing Address 3780 King Ranch Rd

City  
Ukiah

State  
CA

Zip Code  
95482-9200

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

**11 / 02 / 2018**

**Transaction ID : VTQZWHG7ZR4**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Lewis, Bernard, , ,**

Mailing Address 1518 SW Mockingbird Cir

City

Port St Lucie

State  
FL

Zip Code  
34986-2047

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Self-employed

Occupation (for Individual)  
Self-employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG2MG7**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Lewis, Bernard, , ,**

Mailing Address 1518 SW Mockingbird Cir

City

Port St Lucie

State  
FL

Zip Code  
34986-2047

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Self-employed

Occupation (for Individual)  
Self-employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

247.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG2WN2**

Amount of Each Receipt this Period

12.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

62.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Lewis, Bernard, , ,**

Mailing Address 1518 SW Mockingbird Cir

City  
Port St Lucie

State  
FL

Zip Code  
34986-2047

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self-employed

Occupation (for Individual)

Self-employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

11 / 21 / 2018

**Transaction ID : VTQZWHGA4B6**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Lichty, Simone, , ,**

Mailing Address 2121 SE Belmont St

City  
Portland

State  
OR

Zip Code  
97214-2898

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

self

Occupation (for Individual)

psychotherapist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

11 / 21 / 2018

**Transaction ID : VTQZWHGAVD1**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Lima, Anthony, , ,**

Mailing Address 172-20 133 Ave Apt 7C

City  
Jamaica

State  
NY

Zip Code  
11434

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

11 / 02 / 2018

**Transaction ID : VTQZWHG87T5**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

535.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Lin, Angela, , ,**

Mailing Address 1353 Oak St

City

San Francisco

State

CA

Zip Code

94117-2116

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Square One Productions

Occupation (for Individual)

Business Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

**11 / 09 / 2018**

**Transaction ID : VTQZWHG8FX7**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Lin, Angela, , ,**

Mailing Address 1353 Oak St

City

San Francisco

State

CA

Zip Code

94117-2116

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Square One Productions

Occupation (for Individual)

Business Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

**11 / 21 / 2018**

**Transaction ID : VTQZWHGAKT6**

Amount of Each Receipt this Period

75.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Livingston-Andersona, Sharee, , ,**

Mailing Address 212 Settlers Bnd

City

Lancaster

State

PA

Zip Code

17601-2949

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Holrmc

Occupation (for Individual)

Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**11 / 02 / 2018**

**Transaction ID : VTQZWHG8108**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

200.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Love, Cathie, , ,**

Mailing Address 20 Schuyler Hills Rd

City  
Loudonville

State  
NY

Zip Code  
12211-1445

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**10 / 26 / 2018**

**Transaction ID : VTQZWHG6GC8**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Low, Stephanie, , ,**

Mailing Address 1215 5th Ave

City  
New York

State  
NY

Zip Code  
10029-5209

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
self

Occupation (for Individual)  
arts management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

**11 / 09 / 2018**

**Transaction ID : VTQZWHG8H43**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Lynch, Paula, , ,**

Mailing Address 66 Armstrong Cir

City  
Braintree

State  
MA

Zip Code  
02184-6865

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Ameriprise Financial Services

Occupation (for Individual)  
Compliance Supervisor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG4N58**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1600.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
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<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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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Madison, Paula, , ,**

Mailing Address 3369 Fryman PI

City

Studio City

State

CA

Zip Code

91604-4113

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

Transaction ID : VTQZWHG2CY9

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Madison, Paula, , ,**

Mailing Address 3369 Fryman PI

City

Studio City

State

CA

Zip Code

91604-4113

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

Transaction ID : VTQZWHG2Z78

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Madison, Paula, , ,**

Mailing Address 3369 Fryman PI

City

Studio City

State

CA

Zip Code

91604-4113

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary  
☐ Other (specify)

General

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		09		2018

Transaction ID : VTQZWHG8J87

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

210.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 120 OF 313  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Madison, Paula, , ,**

Mailing Address 3369 Fryman Pl

City  
Studio City

State  
CA

Zip Code  
91604-4113

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 09 / 2018

Transaction ID : VTQZWHG8PY8

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Mann, Alison, , ,**

Mailing Address 41 Atlantic St

City  
Portland

State  
ME

Zip Code  
04101-4412

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not Employed

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 21 / 2018

Transaction ID : VTQZWHG9X4

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Mann, Lisa, , ,**

Mailing Address 51 E 2nd St

City  
Brooklyn

State  
NY

Zip Code  
11218-1019

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TOLA architecture pllc

Occupation (for Individual)  
Architect

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

236.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 26 / 2018

Transaction ID : VTQZWHG7FK9

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

350.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 121 OF 313

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Mann, Lisa, , ,**

Mailing Address 51 E 2nd St

City  
Brooklyn

State  
NY

Zip Code  
11218-1019

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
TOLA architecture pllc

Occupation (for Individual)  
Architect

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.00

Date of Receipt

**11 / 09 / 2018**

**Transaction ID : VTQZWHG8HJ4**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Mann, Lisa, , ,**

Mailing Address 51 E 2nd St

City  
Brooklyn

State  
NY

Zip Code  
11218-1019

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
TOLA architecture pllc

Occupation (for Individual)  
Architect

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.00

Date of Receipt

**11 / 21 / 2018**

**Transaction ID : VTQZWHGA2C0**

Amount of Each Receipt this Period

26.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Mann, Marion, , ,**

Mailing Address 266 Beechwood Dr

City  
Bryn Mawr

State  
PA

Zip Code  
19010-1203

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

**11 / 09 / 2018**

**Transaction ID : VTQZWHG8DK2**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

546.00

# **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 122 OF 313

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Mann, Marion, , ,**

Mailing Address 266 Beechwood Dr

City

Bryn Mawr

State

PA

Zip Code

19010-1203

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

**11 / 09 / 2018**

**Transaction ID : VTQZWHG8DN8**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Manriquez, Luis, , ,**

Mailing Address 31015 N Spotted rd Deer Park

City

Deer Park

State

WA

Zip Code

99006

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

WSU

Occupation (for Individual)

Physician

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**11 / 21 / 2018**

**Transaction ID : VTQZWHG9Y48**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Mansbach, Manny, , ,**

Mailing Address 7 Reed Rd

City

Athens

State

VT

Zip Code

05143-8578

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Teacher

Receipt For:

☐ Primary  
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

272.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG2FV1**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1050.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 123 OF 313

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Mansbach, Manny, , ,**

Mailing Address 7 Reed Rd

City  
Athens

State  
VT

Zip Code  
05143-8578

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG3NQ1**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Mansbach, Manny, , ,**

Mailing Address 7 Reed Rd

City  
Athens

State  
VT

Zip Code  
05143-8578

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.00

Date of Receipt

**11 / 02 / 2018**

**Transaction ID : VTQZWHG85F5**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Mansbach, Manny, , ,**

Mailing Address 7 Reed Rd

City  
Athens

State  
VT

Zip Code  
05143-8578

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

272.00

Date of Receipt

**11 / 09 / 2018**

**Transaction ID : VTQZWHG93W1**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

60.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 124 OF 313

(check only one)

<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)

ColorOfChange PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Manuel, Anne, , ,

Mailing Address 2021 Luzerne Ave

City  
Silver SpringState  
MDZip Code  
20910-2134FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MCPSOccupation (for Individual)  
Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	9			2	0	1	8		

Transaction ID : VTQZWHG5M04

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Marcotte, Ethan, , ,

Mailing Address 38 Cambria St  
# 1City  
SomervilleState  
MAZip Code  
02143-1502FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SelfOccupation (for Individual)  
Web designer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	9			2	0	1	8		

Transaction ID : VTQZWHG2QN2

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Matkin-Rawn, Story, , ,

Mailing Address 1600 N Pierce St

City  
Little RockState  
ARZip Code  
72207-5106FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
University of Central ArkansasOccupation (for Individual)  
Instructor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	2			2	0	1	8		

Transaction ID : VTQZWHG8165

Amount of Each Receipt this Period

200.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

320.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 125 OF 313

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Mayer, Oscar, , ,**

Mailing Address 2445 NW Westover Rd  
Unit 311

City  
Portland

State  
OR

Zip Code  
97210-3154

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 21 / 2018

**Transaction ID : VTQZWHGDBX7**

Amount of Each Receipt this Period

300.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. McAuliffe, Carole, , ,**

Mailing Address 40 Way 35 Off Briar

City  
Wellfleet

State  
MA

Zip Code  
02667-7233

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 ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 26 / 2018

**Transaction ID : VTQZWHG6ZZ0**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. McClure, Janet, , ,**

Mailing Address 2174 Cambridge Ave

City  
Cardiff

State  
CA

Zip Code  
92007-1803

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

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG2PF2**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

335.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 126 OF 313

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. McClure, Janet, , ,**

Mailing Address 2174 Cambridge Ave

City  
Cardiff

State  
CA

Zip Code  
92007-1803

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

M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG4A22**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. McClure, Janet, , ,**

Mailing Address 2174 Cambridge Ave

City  
Cardiff

State  
CA

Zip Code  
92007-1803

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

M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG6AF9**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. McClure, Janet, , ,**

Mailing Address 2174 Cambridge Ave

City  
Cardiff

State  
CA

Zip Code  
92007-1803

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

M M M / D D D / Y Y Y Y Y Y  
10 / 26 / 2018

**Transaction ID : VTQZWHG6PP0**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

175.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 127 OF 313

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. McClure, Janet, , ,**

Mailing Address 2174 Cambridge Ave

City  
Cardiff

State  
CA

Zip Code  
92007-1803

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

M M / D D / Y Y Y Y Y Y  
10 / 26 / 2018

**Transaction ID : VTQZWHG6TH0**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. McClure, Janet, , ,**

Mailing Address 537 Ocean View Ave

City  
Encinitas

State  
CA

Zip Code  
92024-2629

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
VA

Occupation (for Individual)  
RN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 02 / 2018

**Transaction ID : VTQZWHG89K5**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. McFeeley, Sandra, , ,**

Mailing Address 390 Tuskarora Trl

City  
Mooresville

State  
NC

Zip Code  
28117-7319

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG44F0**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

85.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 128 OF 313

(check only one)

<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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. McFeeley, Sandra, , ,

Mailing Address 390 Tuskarora Trl

City  
MooresvilleState  
NCZip Code  
28117-7319FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/AOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2018

Transaction ID : VTQZWHG6ZK5

Amount of Each Receipt this Period

40.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. McFeeley, Sandra, , ,

Mailing Address 390 Tuskarora Trl

City  
MooresvilleState  
NCZip Code  
28117-7319FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/AOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2018

Transaction ID : VTQZWHG7QH0

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. McKinley, Micky, , ,

Mailing Address 114 Ripley Rd

City  
MontagueState  
MAZip Code  
01351-9541FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/AOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		21		2018

Transaction ID : VTQZWHG83

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional).....▶

165.00

TOTAL This Period (last page this line number only).....▶



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. McSwigan, John, , ,**

Mailing Address 6358 NE Rosebay Dr

City  
Hillsboro

State  
OR

Zip Code  
97124-5044

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG42A7**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. McSwigan, John, , ,**

Mailing Address 6358 NE Rosebay Dr

City  
Hillsboro

State  
OR

Zip Code  
97124-5044

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

**10** / **26** / **2018**

**Transaction ID : VTQZWHG6HF5**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. McSwigan, Melissa, , ,**

Mailing Address 4131 Bigelow Blvd

City  
Pittsburgh

State  
PA

Zip Code  
15213-1407

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
self

Occupation (for Individual)  
property management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

449.00

Date of Receipt

**10** / **26** / **2018**

**Transaction ID : VTQZWHG7R24**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

300.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. McTavish, Mary, , ,**

Mailing Address 18715 62nd Ave NE

City  
Kenmore

State  
WA

Zip Code  
98028-3301

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
none

Occupation (for Individual)  
none

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

10 / 19 / 2018

**Transaction ID : VTQZWHG3RC1**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Meisel, David, , ,**

Mailing Address 16312 Hillcroft Dr

City  
Rockville

State  
MD

Zip Code  
20853-3203

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not Employed

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 19 / 2018

**Transaction ID : VTQZWHG3844**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Meisel, Myron, , ,**

Mailing Address 2780 McConnell Dr

City  
Los Angeles

State  
CA

Zip Code  
90064-3444

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.99

Date of Receipt

10 / 19 / 2018

**Transaction ID : VTQZWHG4DJ2**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

625.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Meisel, Myron, , ,**

Mailing Address 2780 McConnell Dr

City  
Los Angeles

State  
CA

Zip Code  
90064-3444

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.99

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG5537**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Meisel, Myron, , ,**

Mailing Address 2780 McConnell Dr

City  
Los Angeles

State  
CA

Zip Code  
90064-3444

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.99

Date of Receipt

**11 / 09 / 2018**

**Transaction ID : VTQZWHG8ZJ5**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Meisel, Myron, , ,**

Mailing Address 2780 McConnell Dr

City  
Los Angeles

State  
CA

Zip Code  
90064-3444

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.99

Date of Receipt

**11 / 21 / 2018**

**Transaction ID : VTQZWHG9P73**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

125.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Mellins, Elizabeth, , ,**

Mailing Address 838 Esplanada Way

City  
Stanford

State  
CA

Zip Code  
94305-1015

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Stanford University

Occupation (for Individual)  
Scientist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

725.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG2ZY0**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Mellins, Elizabeth, , ,**

Mailing Address 838 Esplanada Way

City  
Stanford

State  
CA

Zip Code  
94305-1015

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Stanford University

Occupation (for Individual)  
Scientist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

725.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG3PF1**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Mellins, Elizabeth, , ,**

Mailing Address 838 Esplanada Way

City  
Stanford

State  
CA

Zip Code  
94305-1015

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Stanford University

Occupation (for Individual)  
Scientist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

725.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG53M5**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

175.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Mellins, Elizabeth, , ,**

Mailing Address 838 Esplanada Way

City  
Stanford

State  
CA

Zip Code  
94305-1015

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Stanford University

Occupation (for Individual)  
Scientist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

725.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG53Q9**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Mellins, Elizabeth, , ,**

Mailing Address 838 Esplanada Way

City  
Stanford

State  
CA

Zip Code  
94305-1015

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Stanford University

Occupation (for Individual)  
Scientist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

725.00

Date of Receipt

**10** / **26** / **2018**

**Transaction ID : VTQZWHG6N94**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Mellins, Elizabeth, , ,**

Mailing Address 838 Esplanada Way

City  
Stanford

State  
CA

Zip Code  
94305-1015

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Stanford University

Occupation (for Individual)  
Scientist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

725.00

Date of Receipt

**11** / **09** / **2018**

**Transaction ID : VTQZWHG8WQ8**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

125.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Melloh, James, , ,**

Mailing Address 47 Sprague St

City  
S Portland

State  
ME

Zip Code  
04106-3808

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Acupuncturist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

810.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG44Q3**

Amount of Each Receipt this Period

240.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Melloh, James, , ,**

Mailing Address 47 Sprague St

City  
S Portland

State  
ME

Zip Code  
04106-3808

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Acupuncturist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

810.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG5NJ9**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Menduni, Karen, , ,**

Mailing Address 2892 Saddle Ridge Dr

City  
Yorktown Heights

State  
NY

Zip Code  
10598-2310

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 21 / 2018

**Transaction ID : VTQZWHGDS58**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

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590.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Meneakis, Anne, , ,**

Mailing Address 333 9th St

City  
Lake Oswego

State  
OR

Zip Code  
97034-2936

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
IHC Associates

Occupation (for Individual)  
LCSW

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG6535**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Meneakis, Anne, , ,**

Mailing Address 333 9th St

City  
Lake Oswego

State  
OR

Zip Code  
97034-2936

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
IHC Associates

Occupation (for Individual)  
LCSW

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG67T1**

Amount of Each Receipt this Period

4.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Meneakis, Anne, , ,**

Mailing Address 333 9th St

City  
Lake Oswego

State  
OR

Zip Code  
97034-2936

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
IHC Associates

Occupation (for Individual)  
LCSW

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

274.00

Date of Receipt

**11** / **02** / **2018**

**Transaction ID : VTQZWHG86Q1**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

129.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Meneakis, Anne, , ,**

Mailing Address 333 9th St

City

Lake Oswego

State

OR

Zip Code

97034-2936

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

IHC Associates

Occupation (for Individual)

LCSW

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.00

Date of Receipt

**11 / 09 / 2018**

**Transaction ID : VTQZWHG8Y59**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Meneakis, Anne, , ,**

Mailing Address 333 9th St

City

Lake Oswego

State

OR

Zip Code

97034-2936

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

IHC Associates

Occupation (for Individual)

LCSW

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.00

Date of Receipt

**11 / 09 / 2018**

**Transaction ID : VTQZWHG92B6**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Meneakis, Anne, , ,**

Mailing Address 333 9th St

City

Lake Oswego

State

OR

Zip Code

97034-2936

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

IHC Associates

Occupation (for Individual)

LCSW

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

274.00

Date of Receipt

**11 / 21 / 2018**

**Transaction ID : VTQZWHGD0N0**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

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75.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Meyer, Nancy, , ,**

Mailing Address 50 Hayfields Rd

City  
Portola Valley

State  
CA

Zip Code  
94028-7249

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG55R3**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Meyer, Nancy, , ,**

Mailing Address 50 Hayfields Rd

City  
Portola Valley

State  
CA

Zip Code  
94028-7249

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG5671**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Meyer, Nancy, , ,**

Mailing Address 50 Hayfields Rd

City  
Portola Valley

State  
CA

Zip Code  
94028-7249

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

320.00

Date of Receipt

**10** / **26** / **2018**

**Transaction ID : VTQZWHG6KG6**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

85.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Meyer, Nancy, , ,**

Mailing Address 50 Hayfields Rd

City  
Portola Valley

State  
CA

Zip Code  
94028-7249

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

**11 / 21 / 2018**

**Transaction ID : VTQZWHG99M0**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Meyer, Nancy, , ,**

Mailing Address 50 Hayfields Rd

City  
Portola Valley

State  
CA

Zip Code  
94028-7249

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

**11 / 21 / 2018**

**Transaction ID : VTQZWHGB354**

Amount of Each Receipt this Period

15.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Miller, Johann, , ,**

Mailing Address 1674 SW Country Club Pl

City  
Corvallis

State  
OR

Zip Code  
97333-1561

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Self-Employed

Occupation (for Individual)  
Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

211.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG2M34**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

45.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Miller, Johann, , ,**

Mailing Address 1674 SW Country Club Pl

City  
Corvallis

State  
OR

Zip Code  
97333-1561

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG4C09**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Miller, Johann, , ,**

Mailing Address 1674 SW Country Club Pl

City  
Corvallis

State  
OR

Zip Code  
97333-1561

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.00

Date of Receipt

**11 / 09 / 2018**

**Transaction ID : VTQZWHG8G42**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Miller, Johann, , ,**

Mailing Address 1674 SW Country Club Pl

City  
Corvallis

State  
OR

Zip Code  
97333-1561

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

211.00

Date of Receipt

**11 / 21 / 2018**

**Transaction ID : VTQZWHGA924**

Amount of Each Receipt this Period

30.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

90.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 140 OF 313  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Milstein, Amanda, , ,**

Mailing Address 1882 Columbia Rd NW  
Apt 201

City  
Washington

State  
DC

Zip Code  
20009-5137

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
n/a

Occupation (for Individual)  
homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG4657**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Min, Sarah, , ,**

Mailing Address 307 7th Ave

City

New York

State  
NY

Zip Code  
10001-6007

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
self

Occupation (for Individual)  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 09 / 2018

**Transaction ID : VTQZWHG8XK7**

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Min, Sarah, , ,**

Mailing Address 307 7th Ave

City

New York

State  
NY

Zip Code  
10001-6007

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
self

Occupation (for Individual)  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 21 / 2018

**Transaction ID : VTQZWHGBYR1**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

12500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Montague, Miccaela, , ,**

Mailing Address 1821 108th Ave

City  
Oakland

State  
CA

Zip Code  
94603-3909

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
College Track

Occupation (for Individual)  
Program Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG42B5**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Montague, Miccaela, , ,**

Mailing Address 1821 108th Ave

City  
Oakland

State  
CA

Zip Code  
94603-3909

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
College Track

Occupation (for Individual)  
Program Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

**10** / **26** / **2018**

**Transaction ID : VTQZWHG6W41**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Montague, Miccaela, , ,**

Mailing Address 1821 108th Ave

City  
Oakland

State  
CA

Zip Code  
94603-3909

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
College Track

Occupation (for Individual)  
Program Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

**11** / **02** / **2018**

**Transaction ID : VTQZWHG81H2**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

45.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Montague, Miccaela, , ,**

Mailing Address 1821 108th Ave

City  
Oakland

State  
CA

Zip Code  
94603-3909

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

College Track

Occupation (for Individual)

Program Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

11 / 02 / 2018

Transaction ID : VTQZWHG89D8

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Moore, Cornelius, , ,**

Mailing Address 82 Montezuma St

City

San Francisco

State

CA

Zip Code

94110-5109

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

California Newsreel

Occupation (for Individual)

Film Distributor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

10 / 26 / 2018

Transaction ID : VTQZWHG7VD7

Amount of Each Receipt this Period

200.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Moore, Janet, , ,**

Mailing Address 11246 NE 92nd St

City

Kirkland

State

WA

Zip Code

98033-5731

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

10 / 19 / 2018

Transaction ID : VTQZWHG58G6

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

320.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 143 OF 313

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Moore, Mary Annis, , ,**

Mailing Address 518 Thelma Dr

City  
San Antonio

State  
TX

Zip Code  
78212-2458

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

**11 / 09 / 2018**

**Transaction ID : VTQZWHG92V2**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MORRIS, SYLVIA, , ,**

Mailing Address 9696 S Pine Brook Dr

City  
South Jordan

State  
UT

Zip Code  
84095-2318

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 ▼

215.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG2ZJ5**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MORRIS, SYLVIA, , ,**

Mailing Address 9696 S Pine Brook Dr

City  
South Jordan

State  
UT

Zip Code  
84095-2318

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 ▼

215.00

Date of Receipt

**11 / 21 / 2018**

**Transaction ID : VTQZWHGAV74**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

110.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 144 OF 313

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Morrison, Alva, , ,**

Mailing Address PO Box 358

City  
Dixon

State  
NM

Zip Code  
87527-0358

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

ICF

Occupation (for Individual)

Home energy auditor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
10 / 19 / 2018

**Transaction ID : VTQZWHG3T43**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Morton, Regina, , ,**

Mailing Address POB 262327

City  
Memphis

State  
TN

Zip Code  
38186

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY  
10 / 26 / 2018

**Transaction ID : VTQZWHG7922**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Muther, Catherine, , ,**

Mailing Address 153 Upper Ter

City  
San Francisco

State  
CA

Zip Code  
94117-4513

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

MM / DD / YYYY  
11 / 09 / 2018

**Transaction ID : VTQZWHG8XN3**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

450.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Nadel, Virginia, , ,**

Mailing Address 203 Riveredge Dr

City  
Chatham

State  
NJ

Zip Code  
07928-3115

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not Employed

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 26 / 2018

**Transaction ID : VTQZWHG6EH4**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Nettles, Adam, , ,**

Mailing Address 2730 Dale St N  
Apt 312

City  
Roseville

State  
MN

Zip Code  
55113-2321

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Optum

Occupation (for Individual)  
Developer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 26 / 2018

**Transaction ID : VTQZWHG6MN8**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Newell, Margaret, , ,**

Mailing Address 29 Ballard Branch Rd

City  
Weaverville

State  
NC

Zip Code  
28787-9761

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG2MR0**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

375.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Nicholas, Denise, , ,

Mailing Address 932 S Longwood Ave

City

Los Angeles

State

CA

Zip Code

90019-1752

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Writer/Actor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2018

Transaction ID : VTQZWHG85R6

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Nicholas, Denise, , ,

Mailing Address 932 S Longwood Ave

City

Los Angeles

State

CA

Zip Code

90019-1752

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Writer/Actor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		21		2018

Transaction ID : VTQZWHG9NG6

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Nielsen, Paul, , ,

Mailing Address 2700 Point Breeze Dr

City

Wilmington

State

DE

Zip Code

19810-1118

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

self

Occupation (for Individual)

Physicist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

249.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		21		2018

Transaction ID : VTQZWHGDEVY9

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional).....▶

200.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. No last name, Richa, , ,**

Mailing Address 543 Prince St SE

City  
Grand Rapids

State  
MI

Zip Code  
49507-1269

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Not Employed

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG4XC9**

Amount of Each Receipt this Period

200.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. No last name, Richa, , ,**

Mailing Address 543 Prince St SE

City  
Grand Rapids

State  
MI

Zip Code  
49507-1269

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Not Employed

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

**11** / **21** / **2018**

**Transaction ID : VTQZWHGAHM5**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Nonneman, Elaine, , ,**

Mailing Address 226 21st Ave E

City  
Seattle

State  
WA

Zip Code  
98112-5317

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Self-Employed

Occupation (for Individual)  
Grantmaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG5FA3**

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2800.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. O'Grady, Lorraine, , ,**

Mailing Address 155 Bank St  
Apt D-348

City  
New York

State  
NY

Zip Code  
10014-2049

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG4B71**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. O'Grady, Lorraine, , ,**

Mailing Address 155 Bank St  
Apt D-348

City  
New York

State  
NY

Zip Code  
10014-2049

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

**10 / 26 / 2018**

**Transaction ID : VTQZWHG6QB6**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. O'Grady, Lorraine, , ,**

Mailing Address 155 Bank St  
Apt D-348

City  
New York

State  
NY

Zip Code  
10014-2049

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

**11 / 09 / 2018**

**Transaction ID : VTQZWHG90K3**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

295.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. O'Grady, Lorraine, , ,**

Mailing Address 155 Bank St  
Apt D-348

City  
New York

State  
NY

Zip Code  
10014-2049

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

**11 / 21 / 2018**

**Transaction ID : VTQZWHGB2M0**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. O'Neill, Cathy, , ,**

Mailing Address 244 16th St

City

Santa Monica

State

CA

Zip Code

90402-2216

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Not employed

Occupation (for Individual)

Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

**11 / 21 / 2018**

**Transaction ID : VTQZWHGB861**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. O'Neill, Sarah, , ,**

Mailing Address 79 Washington Pl  
Apt 8R

City

New York

State

NY

Zip Code

10011-9137

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2000.35

Date of Receipt

**11 / 21 / 2018**

**Transaction ID : VTQZWHGD4Y9**

Amount of Each Receipt this Period

2000.35

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

3050.35

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Ochshorn, Susan, , ,**

Mailing Address 878 W End Ave  
Apt 7AB

City  
New York

State  
NY

Zip Code  
10025-4956

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
self

Occupation (for Individual)  
Early Childhood Policy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 21 / 2018

**Transaction ID : VTQZWHG9NZ4**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Odell, Katharine H, , ,**

Mailing Address 1415 Vilas Ave

City  
Madison

State  
WI

Zip Code  
53711-2225

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
none

Occupation (for Individual)  
none

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG3VT8**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Osman, Franny, , ,**

Mailing Address 16 Half Moon HI

City  
Acton

State  
MA

Zip Code  
01720-2449

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 26 / 2018

**Transaction ID : VTQZWHG7930**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1350.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

<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)

ColorOfChange PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Oviatt, Susan, , ,

Mailing Address 2303 Custer Pkwy

City  
RichardsonState  
TXZip Code  
75080-2505FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self employed

Occupation (for Individual)

real estate broker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2018

Transaction ID : VTQZWHG6FE1

Amount of Each Receipt this Period

200.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Oxholm, Kimberly, , ,

Mailing Address 1 Watawga Way W

City  
GouldsboroState  
PAZip Code  
18424-8706FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		09		2018

Transaction ID : VTQZWHG93X9

Amount of Each Receipt this Period

60.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Parker, Laura, , ,

Mailing Address 4375 Prairie Rd

City  
Paso RoblesState  
CAZip Code  
93446-9566FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

249.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2018

Transaction ID : VTQZWHG6R69

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

310.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Parker, Rita, , ,**

Mailing Address 2926 Siwanoy Dr

City  
Edgewood

State  
MD

Zip Code  
21040-3435

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

DDA

Occupation (for Individual)

Nurse Anesthetist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

10 / 19 / 2018

**Transaction ID : VTQZWHG3TF0**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Parker, Rita, , ,**

Mailing Address 2926 Siwanoy Dr

City  
Edgewood

State  
MD

Zip Code  
21040-3435

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

DDA

Occupation (for Individual)

Nurse Anesthetist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

10 / 19 / 2018

**Transaction ID : VTQZWHG54Y7**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Parker, Rita, , ,**

Mailing Address 2926 Siwanoy Dr

City  
Edgewood

State  
MD

Zip Code  
21040-3435

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

DDA

Occupation (for Individual)

Nurse Anesthetist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

265.00

Date of Receipt

11 / 21 / 2018

**Transaction ID : VTQZWHG9XQ5**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

175.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Parker, Rita, , ,**

Mailing Address 2926 Siwanoy Dr

City  
Edgewood

State  
MD

Zip Code  
21040-3435

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
DDA

Occupation (for Individual)  
Nurse Anesthetist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

**11** / **21** / **2018**

**Transaction ID : VTQZWHGE216**

Amount of Each Receipt this Period

15.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Parsley, Patricia, , ,**

Mailing Address 20420 Marine Dr

City  
Stanwood

State  
WA

Zip Code  
98292-6116

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Not Employed

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG5FE5**

Amount of Each Receipt this Period

75.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Parsley, Patricia, , ,**

Mailing Address 20420 Marine Dr

City  
Stanwood

State  
WA

Zip Code  
98292-6116

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Not Employed

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

**11** / **02** / **2018**

**Transaction ID : VTQZWHG86K0**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

190.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Pastin, Susan S., , ,**

Mailing Address 1340 W Touhy Ave  
Apt 405

City  
Chicago

State  
IL

Zip Code  
60626-2656

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
US Railroad Retirement Board

Occupation (for Individual)  
Trainer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG67J7**

Amount of Each Receipt this Period

40.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Pastin, Susan S., , ,**

Mailing Address 1340 W Touhy Ave  
Apt 405

City  
Chicago

State  
IL

Zip Code  
60626-2656

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
US Railroad Retirement Board

Occupation (for Individual)  
Trainer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

**10** / **26** / **2018**

**Transaction ID : VTQZWHG7W49**

Amount of Each Receipt this Period

5.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Pawley, Emily, , ,**

Mailing Address 151 Bellair Park Rd  
# B

City  
Carlisle

State  
PA

Zip Code  
17013-9642

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Dickinson College

Occupation (for Individual)  
Historian

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**10** / **26** / **2018**

**Transaction ID : VTQZWHG7243**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

70.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☐ 11a ☐ 11b ☐ 11c ☐ 12  
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Percy, Jim, , ,**

Mailing Address 2014 N 14th St

City  
Boise

State  
ID

Zip Code  
83702-1103

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Saint Lukes Regional Medical Center

Occupation (for Individual)  
Registered Nurse

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG2NZ6**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Peretz, Anne, , ,**

Mailing Address 39 Fayerweather St

City  
Cambridge

State  
MA

Zip Code  
02138-3329

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Not Employed

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG50R1**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Peters, Justin, , ,**

Mailing Address 1628 Bellevue Ave  
Apt 105

City  
Seattle

State  
WA

Zip Code  
98122-0097

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
The Northwest School

Occupation (for Individual)  
Educator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

**11** / **21** / **2018**

**Transaction ID : VTQZWHGE503**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

545.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Petersen, Janet, , ,**

Mailing Address PO Box 18267

City  
Sarasota

State  
FL

Zip Code  
34276-1267

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG3SG5**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Pierce, Carolyn, , ,**

Mailing Address 737 Pacific Ter

City  
Klamath Falls

State  
OR

Zip Code  
97601-2255

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

OHSU

Occupation (for Individual)

physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**10 / 26 / 2018**

**Transaction ID : VTQZWHG74F6**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Pillsbury, Katharine, , ,**

Mailing Address 34 Carver Rd

City  
Newton Highlands

State  
MA

Zip Code  
02461-1008

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Self-Employed-employed

Occupation (for Individual)

consultant writer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

410.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG3Q13**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

600.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Pillsbury, Katharine, , ,**

Mailing Address 34 Carver Rd

City  
Newton Highlands

State  
MA

Zip Code  
02461-1008

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self-Employed-employed

Occupation (for Individual)  
consultant writer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

10 / 19 / 2018

**Transaction ID : VTQZWHG4QZ7**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Pillsbury, Katharine, , ,**

Mailing Address 34 Carver Rd

City  
Newton Highlands

State  
MA

Zip Code  
02461-1008

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self-Employed-employed

Occupation (for Individual)  
consultant writer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

10 / 19 / 2018

**Transaction ID : VTQZWHG4Y98**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Pillsbury, Katharine, , ,**

Mailing Address 34 Carver Rd

City  
Newton Highlands

State  
MA

Zip Code  
02461-1008

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self-Employed-employed

Occupation (for Individual)  
consultant writer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

410.00

Date of Receipt

11 / 21 / 2018

**Transaction ID : VTQZWHGA059**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

200.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 158 OF 313

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Poleshuck, Lucille, , ,**

Mailing Address 290 W End Ave  
# 6B

City  
New York

State  
NY

Zip Code  
10023-8106

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
none

Occupation (for Individual)  
none

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG2XV3**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Pollock, Judith, , ,**

Mailing Address 411 Darrow Ave

City  
Evanston

State  
IL

Zip Code  
60202-3248

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self

Occupation (for Individual)  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG3EX3**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Pollock, Judith, , ,**

Mailing Address 411 Darrow Ave

City  
Evanston

State  
IL

Zip Code  
60202-3248

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self

Occupation (for Individual)  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 21 / 2018

**Transaction ID : VTQZWHGCDY0**

Amount of Each Receipt this Period

30.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

80.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Poole, Elizabeth, , ,**

Mailing Address 1312 Ditmas Ave

City

Brooklyn

State

NY

Zip Code

11226-6504

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Massage Therapist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

**11** / **21** / **2018**

**Transaction ID : VTQZWHGDN75**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Pullman, Aubrey, , ,**

Mailing Address 2037 S Washington St

City

Seattle

State

WA

Zip Code

98144-2212

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Amazon

Occupation (for Individual)

Artist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG4NQ0**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Pullman, Aubrey, , ,**

Mailing Address 2037 S Washington St

City

Seattle

State

WA

Zip Code

98144-2212

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Amazon

Occupation (for Individual)

Artist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

**11** / **09** / **2018**

**Transaction ID : VTQZWHG8VG0**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional).....▶

**TOTAL** This Period (last page this line number only).....▶

200.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

<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)

ColorOfChange PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Quindlen, Louis, , ,

Mailing Address 2831 Atwell Ave

City  
OaklandState  
CAZip Code  
94601-2707FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Peralta community college districtOccupation (for Individual)  
Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

Transaction ID : VTQZWHG2752

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Raman, Karthik, , ,

Mailing Address 163 Noble St  
# 3BCity  
BrooklynState  
NYZip Code  
11222-2533FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/AOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

454.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

Transaction ID : VTQZWHG4SD0

Amount of Each Receipt this Period

4.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rand, Deborah, , ,

Mailing Address 242 E 19th St  
Apt 11FCity  
New YorkState  
NYZip Code  
10003-2637FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

Transaction ID : VTQZWHG3Z85

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

354.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Ratliff, Casey, , ,**

Mailing Address 40 Argyle Rd  
Apt 12C

City  
Brooklyn

State  
NY

Zip Code  
11218-2942

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Criminal Justice Initiative

Occupation (for Individual)

Playwright/Communications and Develc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

10 / 26 / 2018

Transaction ID : VTQZWHG6V81

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Reames, Sherry, , ,**

Mailing Address 522 Virginia Ter

City

Madison

State

WI

Zip Code

53726-5348

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 ▼

350.00

Date of Receipt

10 / 19 / 2018

Transaction ID : VTQZWHG6840

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Reed, Kristin, , ,**

Mailing Address 681 47th Ave

City

San Francisco

State

CA

Zip Code

94121-2440

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

360.00

Date of Receipt

10 / 19 / 2018

Transaction ID : VTQZWHG4VW2

Amount of Each Receipt this Period

27.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

527.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Reed, Kristin, , ,**

Mailing Address 681 47th Ave

City

San Francisco

State

CA

Zip Code

94121-2440

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : VTQZWHG97N4**

Amount of Each Receipt this Period

27.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Reeves, Thomas, , ,**

Mailing Address 101 Stone Point Dr  
Unit 177

City

Annapolis

State

MD

Zip Code

21401-7094

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

498.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG2N35**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Reeves, Thomas, , ,**

Mailing Address 101 Stone Point Dr  
Unit 177

City

Annapolis

State

MD

Zip Code

21401-7094

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary  
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

498.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 26 / 2018

**Transaction ID : VTQZWHG6NV7**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

127.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Reeves, Thomas, , ,**

Mailing Address 101 Stone Point Dr  
Unit 177

City  
Annapolis

State  
MD

Zip Code  
21401-7094

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

498.00

Date of Receipt

**10 / 26 / 2018**

**Transaction ID : VTQZWHG7M19**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Reeves, Thomas, , ,**

Mailing Address 101 Stone Point Dr  
Unit 177

City  
Annapolis

State  
MD

Zip Code  
21401-7094

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

498.00

Date of Receipt

**11 / 09 / 2018**

**Transaction ID : VTQZWHG8NV4**

Amount of Each Receipt this Period

48.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. RIX, Elisabeth, , ,**

Mailing Address 118 Comstock Rd

City  
Woodside

State  
CA

Zip Code  
94062-4507

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG4XH9**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

348.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Robb, Don, , ,**

Mailing Address 3265 Indian Walk

City  
Mechanicsville

State  
PA

Zip Code  
18934-9522

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

**11 / 02 / 2018**

**Transaction ID : VTQZWHG7XD3**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Rohrlich, David, , ,**

Mailing Address 18 Arborway

City  
Jamaica Plain

State  
MA

Zip Code  
02130-2717

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Boston University

Occupation (for Individual)  
professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG42S5**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Rohrlich, David, , ,**

Mailing Address 18 Arborway

City  
Jamaica Plain

State  
MA

Zip Code  
02130-2717

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Boston University

Occupation (for Individual)  
professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

**10 / 26 / 2018**

**Transaction ID : VTQZWHG71K1**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

135.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Rohrllich, David, , ,**

Mailing Address 18 Arborway

City

Jamaica Plain

State

MA

Zip Code

02130-2717

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Boston University

Occupation (for Individual)

professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 21 / 2018

**Transaction ID : VTQZWHGAX85**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Rosenblum, Ruth, , ,**

Mailing Address 71 Cassilis Ave

City

Bronxville

State

NY

Zip Code

10708-1204

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Psychotherapist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG56H8**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Rosenblum, Ruth, , ,**

Mailing Address 71 Cassilis Ave

City

Bronxville

State

NY

Zip Code

10708-1204

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Psychotherapist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 21 / 2018

**Transaction ID : VTQZWHG99C8**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

120.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 166 OF 313

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Rotkin-Ellman, Miriam, , ,**

Mailing Address 85 Manchester St

City

San Francisco

State

CA

Zip Code

94110-5214

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

NRDC

Occupation (for Individual)

Public Health Scientist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 09 / 2018

**Transaction ID : VTQZWHG9460**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Rubin, Todd, , ,**

Mailing Address 201 Santa Monica Blvd  
Ste 480

City

Santa Monica

State

CA

Zip Code

90401-2266

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG3BY5**

Amount of Each Receipt this Period

15.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Rubin, Todd, , ,**

Mailing Address 201 Santa Monica Blvd  
Ste 480

City

Santa Monica

State

CA

Zip Code

90401-2266

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

430.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG5C81**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

290.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 167 OF 313

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Rubin, Todd, , ,**

Mailing Address 201 Santa Monica Blvd  
Ste 480

City  
Santa Monica

State  
CA

Zip Code  
90401-2266

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

**11 / 02 / 2018**

**Transaction ID : VTQZWHG8877**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Rubin, Todd, , ,**

Mailing Address 201 Santa Monica Blvd  
Ste 480

City  
Santa Monica

State  
CA

Zip Code  
90401-2266

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

**11 / 16 / 2018**

**Transaction ID : VTQZWHG95T1**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Rudoy, Sally, , ,**

Mailing Address 173 MacDougal St  
Apt 2E

City  
New York

State  
NY

Zip Code  
10011-9212

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Self

Occupation (for Individual)

Psychotherapist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG2MH4**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

300.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 168 OF 313

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Rudoy, Sally, , ,**

Mailing Address 173 MacDougal St  
Apt 2E

City  
New York

State  
NY

Zip Code  
10011-9212

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self

Occupation (for Individual)  
Psychotherapist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 21 / 2018

**Transaction ID : VTQZWHG9BZ2**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Rukin, Bonnie, , ,**

Mailing Address 48 Evergreen Ln

City  
Camden

State  
ME

Zip Code  
04843-4414

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG3Z27**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Rukin, Bonnie, , ,**

Mailing Address 48 Evergreen Ln

City  
Camden

State  
ME

Zip Code  
04843-4414

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 26 / 2018

**Transaction ID : VTQZWHG7S76**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1100.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Rukin, Bonnie, , ,**

Mailing Address 48 Evergreen Ln

City  
Camden

State  
ME

Zip Code  
04843-4414

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 21 / 2018

**Transaction ID : VTQZWHGB090**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Ryan, James, , ,**

Mailing Address 119 Commonwealth Ave  
Apt 5

City  
Boston

State  
MA

Zip Code  
02116-2338

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Medstro

Occupation (for Individual)  
COO

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  
10 / 19 / 2018

**Transaction ID : VTQZWHG3BM6**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Ryan, Josephine, , ,**

Mailing Address 5555 N Sheridan Rd  
Apt 1106

City  
Chicago

State  
IL

Zip Code  
60640-1639

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

435.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG3E53**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

575.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 170 OF 313

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Ryan, Josephine, , ,**

Mailing Address 5555 N Sheridan Rd  
Apt 1106

City  
Chicago

State  
IL

Zip Code  
60640-1639

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.00

Date of Receipt

**10** / **26** / **2018**

**Transaction ID : VTQZWHG6WZ4**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Rydlewicz, Anne, , ,**

Mailing Address 2479 Collingswood Blvd

City

Port Charlotte

State

FL

Zip Code

33948-1655

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Retired

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG2GH5**

Amount of Each Receipt this Period

200.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Saginaw, Carol, , ,**

Mailing Address 200 W End Ave

City

New York

State

NY

Zip Code

10023-4801

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Not Employed

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG4P35**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

350.00

# **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 171 OF 313

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Saginaw, Carol, , ,**

Mailing Address 200 W End Ave

City  
New York

State  
NY

Zip Code  
10023-4801

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**11 / 09 / 2018**

**Transaction ID : VTQZWHG8GJ1**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Saginaw, Carol, , ,**

Mailing Address 200 W End Ave

City  
New York

State  
NY

Zip Code  
10023-4801

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**11 / 21 / 2018**

**Transaction ID : VTQZWHG9TB4**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Sanford, Wendy C, , ,**

Mailing Address 175 Richdale Ave  
Apt 320

City  
Cambridge

State  
MA

Zip Code  
02140-3354

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG39Q7**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

250.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 172 OF 313

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Sanford, Wendy C, , ,**

Mailing Address 175 Richdale Ave  
Apt 320

City  
Cambridge

State  
MA

Zip Code  
02140-3354

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG4T73**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Sanford, Wendy C, , ,**

Mailing Address 175 Richdale Ave  
Apt 320

City  
Cambridge

State  
MA

Zip Code  
02140-3354

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
11 / 21 / 2018

**Transaction ID : VTQZWHGE1D8**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Sbrana, Lisa, , ,**

Mailing Address 150 Myrtle Ave  
Apt 2706

City  
Brooklyn

State  
NY

Zip Code  
11201-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NYSDOH

Occupation (for Individual)  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG2E65**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

250.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 173 OF 313

(check only one)

<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
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Schaedig, Roland, , ,

Mailing Address 2009 Hall Ave

City  
Ann Arbor

State  
MI

Zip Code  
48104-4815

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2018

Transaction ID : VTQZWHG6XE2

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Schaedig, Roland, , ,

Mailing Address 2009 Hall Ave

City  
Ann Arbor

State  
MI

Zip Code  
48104-4815

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2018

Transaction ID : VTQZWHG8AK6

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Schaedig, Roland, , ,

Mailing Address 2009 Hall Ave

City  
Ann Arbor

State  
MI

Zip Code  
48104-4815

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		21		2018

Transaction ID : VTQZWHGE0R2

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional).....▶

200.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 174 OF 313

(check only one)

<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)

ColorOfChange PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Schaffer, Katrina e, , ,

Mailing Address 130 N Avenue 57

City  
Los Angeles

State  
CA

Zip Code  
90042-4144

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not Employed

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2018

Transaction ID : VTQZWHGDE38

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Schoenbach, Ruth, , ,

Mailing Address 134 Parnassus Ave

City  
San Francisco

State  
CA

Zip Code  
94117-4213

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WestEd

Occupation (for Individual)  
Project Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1147.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2018

Transaction ID : VTQZWHG3AK8

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Schoenbach, Ruth, , ,

Mailing Address 134 Parnassus Ave

City  
San Francisco

State  
CA

Zip Code  
94117-4213

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WestEd

Occupation (for Individual)  
Project Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1147.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2018

Transaction ID : VTQZWHG6W25

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

525.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Schoenbach, Ruth, , ,**

Mailing Address 134 Parnassus Ave

City

San Francisco

State

CA

Zip Code

94117-4213

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

WestEd

Occupation (for Individual)

Project Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1147.00

Date of Receipt

**11 / 21 / 2018**

**Transaction ID : VTQZWHG9MM4**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Schuppisser, Sarah, , ,**

Mailing Address 4116 Coolidge Ave

City

Oakland

State

CA

Zip Code

94602-3433

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

**10 / 26 / 2018**

**Transaction ID : VTQZWHG6VV9**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Schwartz, Miriam, , ,**

Mailing Address 333 Great River Rd  
Apt 409

City

Somerville

State

MA

Zip Code

02145-1222

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4300.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG2E73**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1250.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Schwartz, Miriam, , ,**

Mailing Address 333 Great River Rd  
Apt 409

City  
Somerville

State  
MA

Zip Code  
02145-1222

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG2R57**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Schwartz, Miriam, , ,**

Mailing Address 333 Great River Rd  
Apt 409

City  
Somerville

State  
MA

Zip Code  
02145-1222

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 21 / 2018

**Transaction ID : VTQZWHGDK87**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Schweitzer, Chris, , ,**

Mailing Address 363 Elm St

City  
New Haven

State  
CT

Zip Code  
06511-4709

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not Employed

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 21 / 2018

**Transaction ID : VTQZWHGE5J6**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1100.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Seales, Amanda, , ,**

Mailing Address 5760 Laurel Canyon Blvd  
Apt 17

City  
Valley Vlg

State  
CA

Zip Code  
91607-5213

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self

Occupation (for Individual)  
Comedian

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 21 / 2018

**Transaction ID : VTQZWHG9KX3**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Segre, Nina, , ,**

Mailing Address 226 W Rittenhouse Sq  
Apt 305

City  
Philadelphia

State  
PA

Zip Code  
19103-5734

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 ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG2HA3**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Segre, Nina, , ,**

Mailing Address 226 W Rittenhouse Sq  
Apt 305

City  
Philadelphia

State  
PA

Zip Code  
19103-5734

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 ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 26 / 2018

**Transaction ID : VTQZWHG7RT4**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

450.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Segre, Nina, , ,**

Mailing Address 226 W Rittenhouse Sq  
Apt 305

City  
Philadelphia

State  
PA

Zip Code  
19103-5734

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 ▼

400.00

Date of Receipt

**11** / **21** / **2018**

**Transaction ID : VTQZWHGDEA3**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Shannon, Margarita, , ,**

Mailing Address 119 Mill Ln

City

Amherst

State

MA

Zip Code

01002-2931

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Greenfield Community College

Occupation (for Individual)  
Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG4EZ7**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Shaw, Toni, , ,**

Mailing Address 5307 8th Ave

City

Los Angeles

State

CA

Zip Code

90043-4857

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Not Employed

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

217.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG2TE4**

Amount of Each Receipt this Period

12.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1112.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Shaw, Toni, , ,**

Mailing Address 5307 8th Ave

City

Los Angeles

State

CA

Zip Code

90043-4857

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.00

Date of Receipt

**11 / 09 / 2018**

**Transaction ID : VTQZWHG8FZ3**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Shea, Lindsay, , ,**

Mailing Address 21 Marlin Hill Rd

City

Germantown

State

NY

Zip Code

12526-5004

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG4PT4**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Shea, Lindsay, , ,**

Mailing Address 21 Marlin Hill Rd

City

Germantown

State

NY

Zip Code

12526-5004

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

**11 / 09 / 2018**

**Transaction ID : VTQZWHG8YE0**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

120.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Sheinfeld, Susan, , ,**

Mailing Address 220 Bedford St  
# 8E

City  
Bridgewater

State  
MA

Zip Code  
02324-3146

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 26 / 2018

**Transaction ID : VTQZWHG7TR2**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Sheinfeld, Susan, , ,**

Mailing Address 220 Bedford St  
# 8E

City  
Bridgewater

State  
MA

Zip Code  
02324-3146

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 02 / 2018

**Transaction ID : VTQZWHG7YK1**

Amount of Each Receipt this Period

12.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Silberman, Claire, , ,**

Mailing Address 360 Furman St  
Apt 1216

City  
Brooklyn

State  
NY

Zip Code  
11201-4579

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

none

Occupation (for Individual)

homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

699.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG51C9**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

612.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Slivka, Terri, , ,**

Mailing Address 1555 Blake St  
Unit 1001

City  
Denver

State  
CO

Zip Code  
80202-1883

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG2GX0**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Slivka, Terri, , ,**

Mailing Address 1555 Blake St  
Unit 1001

City  
Denver

State  
CO

Zip Code  
80202-1883

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**10 / 26 / 2018**

**Transaction ID : VTQZWHG7VE5**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Slivka, Terri, , ,**

Mailing Address 1555 Blake St  
Unit 1001

City  
Denver

State  
CO

Zip Code  
80202-1883

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**11 / 21 / 2018**

**Transaction ID : VTQZWHGAQ33**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

300.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Smith, Janna, , ,**

Mailing Address 55 Thompson Ln

City  
Milton

State  
MA

Zip Code  
02186-3255

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Cambridge Health Alliance and self

Occupation (for Individual)  
Social Worker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG47B5**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Smith, Jodie, , ,**

Mailing Address 177 19th St  
Apt 4D

City  
Oakland

State  
CA

Zip Code  
94612-4634

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Moscone Emblidge & Otis LLP

Occupation (for Individual)  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

699.00

Date of Receipt

**11** / **21** / **2018**

**Transaction ID : VTQZWHGA0T5**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Smith, Shawn, , ,**

Mailing Address 133 E 18th St

City  
Chicago

State  
IL

Zip Code  
60616-1271

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
PFF

Occupation (for Individual)  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

255.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG3HJ3**

Amount of Each Receipt this Period

30.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

550.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Smith, William, , ,**

Mailing Address 1007 E Capitol St SE

City  
Washington

State  
DC

Zip Code  
20003-3905

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Civitas Public Affairs

Occupation (for Individual)  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

**10 / 26 / 2018**

**Transaction ID : VTQZWHG76S8**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Snipper, Reuben, , ,**

Mailing Address 705 Erie Ave

City  
Takoma Park

State  
MD

Zip Code  
20912-6355

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Not employed

Occupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG2W72**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Snipper, Reuben, , ,**

Mailing Address 705 Erie Ave

City  
Takoma Park

State  
MD

Zip Code  
20912-6355

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Not employed

Occupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG2X67**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1200.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Soffer, Jill, , ,**

Mailing Address 561 Spring Park Ranch Rd

City  
Carbondale

State  
CO

Zip Code  
81623-9118

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG26M8**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Soffer, Jill, , ,**

Mailing Address 561 Spring Park Ranch Rd

City  
Carbondale

State  
CO

Zip Code  
81623-9118

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

**11 / 21 / 2018**

**Transaction ID : VTQZWHGBJN2**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Southwest Airlines**

Mailing Address 2702 Love Field Dr

City  
Dallas

State  
TX

Zip Code  
75235-1908

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 ▼

1057.98

Date of Receipt

**10 / 22 / 2018**

**Transaction ID : VTQZWHGEPQ1**

Amount of Each Receipt this Period

1057.98

☐ Memo Item

Refund, Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1557.98



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Sprague, Susan, , ,**

Mailing Address 104 Blue Jay Dr

City

Lakeway

State

TX

Zip Code

78734-5165

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG5AR2**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Sprague, Susan, , ,**

Mailing Address 104 Blue Jay Dr

City

Lakeway

State

TX

Zip Code

78734-5165

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 02 / 2018

**Transaction ID : VTQZWHG7YA0**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Spray, Marcia, , ,**

Mailing Address 6 Wyndham Pl

City

Durham

State

NC

Zip Code

27705-6440

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 26 / 2018

**Transaction ID : VTQZWHG6VA7**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

300.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
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(check only one)

<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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Spray, Marcia, , ,

Mailing Address 6 Wyndham Pl

City  
DurhamState  
NCZip Code  
27705-6440FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/AOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2018

Transaction ID : VTQZWHG8RV0

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Spray, Marcia, , ,

Mailing Address 6 Wyndham Pl

City  
DurhamState  
NCZip Code  
27705-6440FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/AOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2018

Transaction ID : VTQZWHG8Y33

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Stafford, Margaret, , ,

Mailing Address 4075 23rd St

City  
San FranciscoState  
CAZip Code  
94114-3213FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
UCSFOccupation (for Individual)  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2018

Transaction ID : VTQZWHG8KS2

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional).....▶

175.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Starr, Jane, , ,**

Mailing Address 12016 SW Cedarhurst Rd

City  
Vashon

State  
WA

Zip Code  
98070-3514

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 ▼

900.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG2PG0**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Starr, Jane, , ,**

Mailing Address 12016 SW Cedarhurst Rd

City  
Vashon

State  
WA

Zip Code  
98070-3514

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 ▼

900.00

Date of Receipt

**11 / 21 / 2018**

**Transaction ID : VTQZWHGAZ89**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Starr, Susan, , ,**

Mailing Address 8315 CJ Landing

City  
Pinckney

State  
MI

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Mrs.

Occupation (for Individual)

Instructor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

228.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG5SV7**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

360.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Starr, Susan, , ,**

Mailing Address 8315 CJ Landing

City  
Pinckney

State  
MI

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Mrs.

Occupation (for Individual)  
Instructor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 26 / 2018

**Transaction ID : VTQZWHG6QZ4**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Starr, Susan, , ,**

Mailing Address 8315 CJ Landing

City  
Pinckney

State  
MI

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Mrs.

Occupation (for Individual)  
Instructor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 26 / 2018

**Transaction ID : VTQZWHG7CV6**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Starr, Susan, , ,**

Mailing Address 8315 CJ Landing

City  
Pinckney

State  
MI

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Mrs.

Occupation (for Individual)  
Instructor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 09 / 2018

**Transaction ID : VTQZWHG8D62**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

55.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Steele, Mary, , ,**

Mailing Address 24561 La Hermosa Ave

City

Laguna Niguel

State

CA

Zip Code

92677-2104

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

3700.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG3AZ0**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Steele, Mary, , ,**

Mailing Address 24561 La Hermosa Ave

City

Laguna Niguel

State

CA

Zip Code

92677-2104

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

3700.00

Date of Receipt

**10 / 26 / 2018**

**Transaction ID : VTQZWHG75H2**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Steele, Mary, , ,**

Mailing Address 24561 La Hermosa Ave

City

Laguna Niguel

State

CA

Zip Code

92677-2104

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary  
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

3700.00

Date of Receipt

**11 / 02 / 2018**

**Transaction ID : VTQZWHG86Y7**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Stein, Helen, , ,**

Mailing Address 710 W End Ave  
# 16A

City  
New York

State  
NY

Zip Code  
10025-6808

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Clinical Psychologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2018

Transaction ID : VTQZWHG2DY2

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Stein, Helen, , ,**

Mailing Address 710 W End Ave  
# 16A

City  
New York

State  
NY

Zip Code  
10025-6808

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Clinical Psychologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 26 / 2018

Transaction ID : VTQZWHG6Y20

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Stein, Jane, , ,**

Mailing Address 750 Weaver Dairy Rd  
Apt 1324

City  
Chapel Hill

State  
NC

Zip Code  
27514-4900

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Small Business Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 26 / 2018

Transaction ID : VTQZWHG6GV7

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

300.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Steinberger, Cynthia, , ,**

Mailing Address Chemin des Merles 25

City  
Onex

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG56J6**

Amount of Each Receipt this Period

27.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Steinberger, Cynthia, , ,**

Mailing Address Chemin des Merles 25

City  
Onex

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 21 / 2018

**Transaction ID : VTQZWHG9A46**

Amount of Each Receipt this Period

27.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Stern, Gillian, , ,**

Mailing Address 26 E 81st St  
Apt 5S

City  
New York

State  
NY

Zip Code  
10028-0219

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 02 / 2018

**Transaction ID : VTQZWHG85A6**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

64.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Stern, Gillian, , ,**

Mailing Address 26 E 81st St  
Apt 5S

City  
New York

State  
NY

Zip Code  
10028-0219

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

11 / 21 / 2018

Transaction ID : VTQZWHG9WH5

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Stewart, Nzingha, , ,**

Mailing Address 7439 Woodman Ave  
Unit 30

City

Van Nuys

State  
CA

Zip Code  
91405-1572

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Filmmaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

10 / 19 / 2018

Transaction ID : VTQZWHG4NM6

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Stewart, Nzingha, , ,**

Mailing Address 7439 Woodman Ave  
Unit 30

City

Van Nuys

State  
CA

Zip Code  
91405-1572

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Filmmaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

11 / 09 / 2018

Transaction ID : VTQZWHG8VM1

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

140.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Stewart, Taylor, , ,**

Mailing Address 2210 Sommers Ave

City  
Madison

State  
WI

Zip Code  
53704-5609

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Epic Systems Corporation

Occupation (for Individual)

Technical analyst

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG32Q1**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Stonington, Louise, , ,**

Mailing Address 1922 15th Ave E

City  
Seattle

State  
WA

Zip Code  
98112-2829

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG5HX7**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Stutsman, Rachel, , ,**

Mailing Address 625 Bryn Mawr Dr

City  
Indianapolis

State  
IN

Zip Code  
46260-4735

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

**10** / **26** / **2018**

**Transaction ID : VTQZWHG6HV9**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

575.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Stutsman, Rachel, , ,**

Mailing Address 625 Bryn Mawr Dr

City  
Indianapolis

State  
IN

Zip Code  
46260-4735

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

**11** / **21** / **2018**

**Transaction ID : VTQZWHGASA2**

Amount of Each Receipt this Period

30.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Sullivan, Mark, , ,**

Mailing Address 2635 Russell St

City  
Berkeley

State  
CA

Zip Code  
94705-2131

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Psychotherapist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

**11** / **09** / **2018**

**Transaction ID : VTQZWHG8CA0**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Suttie, Jill, , ,**

Mailing Address 988 Creston Rd

City  
Berkeley

State  
CA

Zip Code  
94708-1544

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Writer/Editor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

**11** / **21** / **2018**

**Transaction ID : VTQZWHGCT19**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

230.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Sutton, Beth, , ,**

Mailing Address 4401 Fairview Rd

City  
Reno

State  
NV

Zip Code  
89511-6524

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Enki Education Inc.

Occupation (for Individual)  
Educator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

**10 / 26 / 2018**

**Transaction ID : VTQZWHG6C12**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Tamkin, Sandi, , ,**

Mailing Address 2633 Lincoln Blvd  
# 833

City

Santa Monica

State  
CA

Zip Code  
90405-4619

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
MASC

Occupation (for Individual)  
Non-Profit

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG25P1**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Tamkin, Sandi, , ,**

Mailing Address 2633 Lincoln Blvd  
# 833

City

Santa Monica

State  
CA

Zip Code  
90405-4619

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
MASC

Occupation (for Individual)  
Non-Profit

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

**11 / 21 / 2018**

**Transaction ID : VTQZWHGE5H8**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

100.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Taylor, Leah, , ,**

Mailing Address 3720 SW Bond Ave  
Unit 1806

City  
Portland

State  
OR

Zip Code  
97239-4576

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Providence

Occupation (for Individual)  
Nurse

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG2NX0**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Taylor, Leah, , ,**

Mailing Address 3720 SW Bond Ave  
Unit 1806

City  
Portland

State  
OR

Zip Code  
97239-4576

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Providence

Occupation (for Individual)  
Nurse

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

**10 / 26 / 2018**

**Transaction ID : VTQZWHG6VM4**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Taylor, Leah, , ,**

Mailing Address 3720 SW Bond Ave  
Unit 1806

City  
Portland

State  
OR

Zip Code  
97239-4576

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Providence

Occupation (for Individual)  
Nurse

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

420.00

Date of Receipt

**11 / 02 / 2018**

**Transaction ID : VTQZWHG84K4**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

160.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Taylor, Leah, , ,**

Mailing Address 3720 SW Bond Ave  
Unit 1806

City  
Portland

State  
OR

Zip Code  
97239-4576

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Providence

Occupation (for Individual)  
Nurse

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

**11** / **21** / **2018**

**Transaction ID : VTQZWHGE6Q6**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Teichert, Diane, , ,**

Mailing Address 4321 Van Buren St

City

University Park

State

MD

Zip Code

20782-1190

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Paint Branch UU Church

Occupation (for Individual)  
Clergy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG29S4**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Telesford, Jacquelin, , ,**

Mailing Address 10721 E Jefferson Ave

City

Detroit

State

MI

Zip Code

48214-7461

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Weatherby Healthcare

Occupation (for Individual)  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

375.00

Date of Receipt

**10** / **26** / **2018**

**Transaction ID : VTQZWHG6Y38**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

160.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Telsey, Nadia, , ,**

Mailing Address 1207 W 4th Ave

City  
Eugene

State  
OR

Zip Code  
97402-4503

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Not employed

Occupation (for Individual)

Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG59S7**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Telsey, Nadia, , ,**

Mailing Address 1207 W 4th Ave

City  
Eugene

State  
OR

Zip Code  
97402-4503

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Not employed

Occupation (for Individual)

Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

**10 / 26 / 2018**

**Transaction ID : VTQZWHG7P88**

Amount of Each Receipt this Period

5.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Telsey, Nadia, , ,**

Mailing Address 1207 W 4th Ave

City  
Eugene

State  
OR

Zip Code  
97402-4503

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Not employed

Occupation (for Individual)

Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

245.00

Date of Receipt

**11 / 02 / 2018**

**Transaction ID : VTQZWHG82F9**

Amount of Each Receipt this Period

3.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

108.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Temple, Tamara, , ,**

Mailing Address 1585 Dodd Rd  
Apt 202

City  
Mendota Heights

State  
MN

Zip Code  
55118-2840

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Reachlocal

Occupation (for Individual)  
Software Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG4ZZ5**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Temple, Tamara, , ,**

Mailing Address 1585 Dodd Rd  
Apt 202

City  
Mendota Heights

State  
MN

Zip Code  
55118-2840

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Reachlocal

Occupation (for Individual)  
Software Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

**11** / **02** / **2018**

**Transaction ID : VTQZWHG7ZQ6**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Tennis, Kara, , ,**

Mailing Address 6659 Wayne Ave

City  
Phila

State  
PA

Zip Code  
19119-3521

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG2DJ7**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

360.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Tennis, Kara, , ,**

Mailing Address 6659 Wayne Ave

City  
Phila

State  
PA

Zip Code  
19119-3521

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG3259**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Tennis, Kara, , ,**

Mailing Address 6659 Wayne Ave

City  
Phila

State  
PA

Zip Code  
19119-3521

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

**10 / 26 / 2018**

**Transaction ID : VTQZWHG6TT1**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Tennis, Kara, , ,**

Mailing Address 6659 Wayne Ave

City  
Phila

State  
PA

Zip Code  
19119-3521

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

**11 / 21 / 2018**

**Transaction ID : VTQZWHGB4G4**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

600.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Thomas, Allison, , ,**

Mailing Address 11444 W Olympic Blvd

City

Los Angeles

State

CA

Zip Code

90064-1549

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Producer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG2RB4**

Amount of Each Receipt this Period

5.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Thomas, Allison, , ,**

Mailing Address 11444 W Olympic Blvd

City

Los Angeles

State

CA

Zip Code

90064-1549

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Producer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

**11 / 02 / 2018**

**Transaction ID : VTQZWHG8564**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Thomas, Allison, , ,**

Mailing Address 11444 W Olympic Blvd

City

Los Angeles

State

CA

Zip Code

90064-1549

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Producer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

285.00

Date of Receipt

**11 / 09 / 2018**

**Transaction ID : VTQZWHG8TY8**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

**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 202 OF 313

(check only one)

<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)

ColorOfChange PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Thompson, Mark, , ,

Mailing Address 22006 E Lost Lake Rd

City  
SnohomishState  
WAZip Code  
98296-3929FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/AOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2018

Transaction ID : VTQZWHG8572

Amount of Each Receipt this Period

72.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Thompson, Mark, , ,

Mailing Address 22006 E Lost Lake Rd

City  
SnohomishState  
WAZip Code  
98296-3929FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/AOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		21		2018

Transaction ID : VTQZWHGA8A6

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Thompson, Megan, , ,

Mailing Address 727 N Capitol Ave  
Apt 306City  
LansingState  
MIZip Code  
48906-5148FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Michigan State UniversityOccupation (for Individual)  
Data Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2018

Transaction ID : VTQZWHG8962

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional).....▶

172.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 203 OF 313

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Thompson, Megan, , ,**

Mailing Address 727 N Capitol Ave  
Apt 306

City  
Lansing

State  
MI

Zip Code  
48906-5148

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Michigan State University

Occupation (for Individual)  
Data Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**11 / 21 / 2018**

**Transaction ID : VTQZWHGD4C7**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Tillman, Latricia, , ,**

Mailing Address 3020 Prosperity Church Rd

City

Charlotte

State  
NC

Zip Code  
28269-7197

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
State of Oregon

Occupation (for Individual)  
Health policy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**11 / 21 / 2018**

**Transaction ID : VTQZWHGA0S7**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Tobey, Eugene, , ,**

Mailing Address 278 Forts Ferry Rd

City

Latham

State  
NY

Zip Code  
12110-1209

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

**10 / 26 / 2018**

**Transaction ID : VTQZWHG6CB1**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

350.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 204 OF 313

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Tobey, Eugene, , ,**

Mailing Address 278 Forts Ferry Rd

City  
Latham

State  
NY

Zip Code  
12110-1209

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

**11 / 02 / 2018**

**Transaction ID : VTQZWHG82T6**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Tolmach, Richard, , ,**

Mailing Address 1730 13th St

City  
Sacramento

State  
CA

Zip Code  
95811-5854

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Self-Employed

Occupation (for Individual)  
Transportation Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

**11 / 09 / 2018**

**Transaction ID : VTQZWHG8MY5**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Treat, Jay, , ,**

Mailing Address 140 Green Hill Rd

City  
King Of Prussia

State  
PA

Zip Code  
19406-2026

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Sizmek

Occupation (for Individual)  
Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

290.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG2889**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

135.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 205 OF 313

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Treat, Jay, , ,**

Mailing Address 140 Green Hill Rd

City  
King Of Prussia

State  
PA

Zip Code  
19406-2026

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Sizmek

Occupation (for Individual)  
Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

**10 / 26 / 2018**

**Transaction ID : VTQZWHG6DM5**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Treat, Jay, , ,**

Mailing Address 140 Green Hill Rd

City  
King Of Prussia

State  
PA

Zip Code  
19406-2026

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Sizmek

Occupation (for Individual)  
Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

**11 / 21 / 2018**

**Transaction ID : VTQZWHGD5N1**

Amount of Each Receipt this Period

15.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Tsien, Wendy, , ,**

Mailing Address 85200 Ridgetop Dr

City  
Eugene

State  
OR

Zip Code  
97405-9535

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

330.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG3VE3**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

115.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 206 OF 313

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Tsien, Wendy, , ,**

Mailing Address 85200 Ridgetop Dr

City  
Eugene

State  
OR

Zip Code  
97405-9535

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

**11 / 21 / 2018**

**Transaction ID : VTQZWHGBDR6**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Tweedy, Ellie, , ,**

Mailing Address 443 12th St  
Apt 1D

City  
Brooklyn

State  
NY

Zip Code  
11215-5146

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG31G3**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Updike, Helen, , ,**

Mailing Address 10 Mitchell Pl

City  
New York

State  
NY

Zip Code  
10017-1801

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2570.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG5E27**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

800.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 207 OF 313  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Updike, Helen, , ,**

Mailing Address 10 Mitchell Pl

City  
New York

State  
NY

Zip Code  
10017-1801

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2570.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG5E43**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Updike, Helen, , ,**

Mailing Address 10 Mitchell Pl

City  
New York

State  
NY

Zip Code  
10017-1801

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2570.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG5EJ3**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Updike, Helen, , ,**

Mailing Address 10 Mitchell Pl

City  
New York

State  
NY

Zip Code  
10017-1801

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2570.00

Date of Receipt

**10** / **26** / **2018**

**Transaction ID : VTQZWHG6DE8**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

760.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 208 OF 313

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Updike, Helen, , ,**

Mailing Address 10 Mitchell Pl

City  
New York

State  
NY

Zip Code  
10017-1801

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2570.00

Date of Receipt

**11** / **09** / **2018**

**Transaction ID : VTQZWHG8WR6**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Updike, Helen, , ,**

Mailing Address 10 Mitchell Pl

City  
New York

State  
NY

Zip Code  
10017-1801

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2570.00

Date of Receipt

**11** / **16** / **2018**

**Transaction ID : VTQZWHG97V1**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Updike, Helen, , ,**

Mailing Address 10 Mitchell Pl

City  
New York

State  
NY

Zip Code  
10017-1801

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2570.00

Date of Receipt

**11** / **21** / **2018**

**Transaction ID : VTQZWHGAYP7**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

610.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 209 OF 313

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Van Nouhuys, Saskya, , ,**

Mailing Address 227 Bryant Ave

City  
Ithaca

State  
NY

Zip Code  
14850-4703

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**10 / 26 / 2018**

**Transaction ID : VTQZWHG7EG3**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Veazey, Liz, , ,**

Mailing Address 1145 Park Ave

City  
Omaha

State  
NE

Zip Code  
68105-6970

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Self Employed

Occupation (for Individual)  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

**11 / 02 / 2018**

**Transaction ID : VTQZWHG8523**

Amount of Each Receipt this Period

30.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Wald, Deborah, , ,**

Mailing Address 96 Dellbrook Ave

City  
San Francisco

State  
CA

Zip Code  
94131-1207

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Wald Law Group

Occupation (for Individual)  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

**11 / 09 / 2018**

**Transaction ID : VTQZWHG8GH3**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional).....▶

**TOTAL** This Period (last page this line number only).....▶

630.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 210 OF 313

(check only one)

<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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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wald, Deborah, , ,

Mailing Address 96 Dellbrook Ave

City

San Francisco

State

CA

Zip Code

94131-1207

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Wald Law Group

Occupation (for Individual)

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2018

Transaction ID : VTQZWHG9RE4

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Walker, Alicia, , ,

Mailing Address 1714 Franklin St  
# 100-136

City

Oakland

State

CA

Zip Code

94612-3488

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Information RequestedOccupation (for Individual)  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2018

Transaction ID : VTQZWHG24F5

Amount of Each Receipt this Period

450.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Warriner, Elizabeth, , ,

Mailing Address 119 NW Drake Rd

City

Bend

State

OR

Zip Code

97703-2311

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Not employed

Occupation (for Individual)

Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2018

Transaction ID : VTQZWHG9BP21

Amount of Each Receipt this Period

200.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

750.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Washburn, John, , ,**

Mailing Address 111 E 30th St

City  
New York

State  
NY

Zip Code  
10016-7356

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Columbia University

Occupation (for Individual)  
Non-governmental official

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**11** / **21** / **2018**

**Transaction ID : VTQZWHGCS18**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Watson, A J, , ,**

Mailing Address 15399 Abierto Dr

City  
Rancho Murieta

State  
CA

Zip Code  
95683-9194

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Not Employed

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG2847**

Amount of Each Receipt this Period

65.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Watson, A J, , ,**

Mailing Address 15399 Abierto Dr

City  
Rancho Murieta

State  
CA

Zip Code  
95683-9194

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Not Employed

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

234.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG3ST4**

Amount of Each Receipt this Period

65.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

630.00

# **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 212 OF 313

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. Way to Win**

Mailing Address 340 S Lemon Ave  
# 1940

City  
Walnut

State  
CA

Zip Code  
91789-2706

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 ▼

125000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 29 / 2018

**Transaction ID : VTQZWHGEP17**

Amount of Each Receipt this Period

25000.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. Way to Win**

Mailing Address 340 S Lemon Ave  
# 1940

City  
Walnut

State  
CA

Zip Code  
91789-2706

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 ▼

125000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 05 / 2018

**Transaction ID : VTQZWHGEP25**

Amount of Each Receipt this Period

75000.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. Webster, Marilyn, , ,**

Mailing Address 679 Whately Rd

City  
Conway

State  
MA

Zip Code  
01341-9771

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self-Employed

Occupation (for Individual)  
Artisan

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

321.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG4M21**

Amount of Each Receipt this Period

21.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

100021.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Webster, Marilyn, , ,**

Mailing Address 679 Whately Rd

City  
Conway

State  
MA

Zip Code  
01341-9771

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Artisan

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

321.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG4VV4**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Webster, Marilyn, , ,**

Mailing Address 679 Whately Rd

City  
Conway

State  
MA

Zip Code  
01341-9771

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Artisan

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

321.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2018

**Transaction ID : VTQZWHG97M6**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Weikart, George Scott, , ,**

Mailing Address 828 Guinda St

City  
Palo Alto

State  
CA

Zip Code  
94301-2905

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

self

Occupation (for Individual)

Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 21 / 2018

**Transaction ID : VTQZWHGDFW6**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

290.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Weil, Karen, , ,**

Mailing Address 1209 Bonita Ave

City  
Berkeley

State  
CA

Zip Code  
94709-1922

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
self

Occupation (for Individual)  
artist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2018

**Transaction ID : VTQZWHG2A90**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Weil, Karen, , ,**

Mailing Address 1209 Bonita Ave

City  
Berkeley

State  
CA

Zip Code  
94709-1922

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
self

Occupation (for Individual)  
artist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 21 / 2018

**Transaction ID : VTQZWHGE2B5**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Weil, Sandy, , ,**

Mailing Address 2083 28th Ave

City  
San Francisco

State  
CA

Zip Code  
94116-1160

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 09 / 2018

**Transaction ID : VTQZWHG8MZ3**

Amount of Each Receipt this Period

150.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

700.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Weiner, Ian, , ,**

Mailing Address 700 Matthew Ct  
Apt 102

City  
Braintree

State  
MA

Zip Code  
02184-6720

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
MIT Lincoln Laboratory

Occupation (for Individual)  
Technical Staff

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**10** / **26** / **2018**

**Transaction ID : VTQZWHG6QY6**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Weinholtz, Donna, , ,**

Mailing Address 11768 Ellice St

City  
Malibu

State  
CA

Zip Code  
90265-2493

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
none

Occupation (for Individual)  
none

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**11** / **21** / **2018**

**Transaction ID : VTQZWHGBTR2**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Weinstock, Douglas, , ,**

Mailing Address 88 Larch Rd

City  
Cambridge

State  
MA

Zip Code  
02138-3317

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Not Employed

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

725.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG3CT6**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

775.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

<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)

ColorOfChange PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Weinstock, Douglas, , ,

Mailing Address 88 Larch Rd

City  
CambridgeState  
MAZip Code  
02138-3317FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

725.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

Transaction ID : VTQZWHG4240

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Welborn, Tes, , ,

Mailing Address 2001 Oak St

City

San Francisco

State  
CAZip Code  
94117-1802FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

Transaction ID : VTQZWHG2C28

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Welborn, Tes, , ,

Mailing Address 2001 Oak St

City

San Francisco

State  
CAZip Code  
94117-1802FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

Transaction ID : VTQZWHG45X3

Amount of Each Receipt this Period

40.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional).....▶

565.00

TOTAL This Period (last page this line number only).....▶



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Wheat, Mary, , ,**

Mailing Address 2715 12th St

City  
Astoria

State  
NY

Zip Code  
11102-3741

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**11 / 09 / 2018**

**Transaction ID : VTQZWHG8QA3**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Wheat, Mary, , ,**

Mailing Address 2715 12th St

City  
Astoria

State  
NY

Zip Code  
11102-3741

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**11 / 09 / 2018**

**Transaction ID : VTQZWHG8QS2**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Whitaker, Blair, , ,**

Mailing Address 161 Race St

City  
Denver

State  
CO

Zip Code  
80206-4610

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Not Employed

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**11 / 02 / 2018**

**Transaction ID : VTQZWHG83J5**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

350.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. White, ArdismL, , ,

Mailing Address 4416 Lake Mildred Rd

City  
RhinelandState  
WIZip Code  
54501-9754FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
noneOccupation (for Individual)  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2018

Transaction ID : VTQZWHGDKE5

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. White, Catherine, , ,

Mailing Address 501 W Charles St

City  
ChampaignState  
ILZip Code  
61820-6401FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/AOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2018

Transaction ID : VTQZWHG6E26

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. White, Ethan, , ,

Mailing Address 806 NW 22nd St

City  
GainesvilleState  
FLZip Code  
32603-1037FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
University of FloridaOccupation (for Individual)  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2018

Transaction ID : VTQZWHG3SM7

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

400.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. White, Ethan, , ,**

Mailing Address 806 NW 22nd St

City  
Gainesville

State  
FL

Zip Code  
32603-1037

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
University of Florida

Occupation (for Individual)  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG48P5**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. White, Ethan, , ,**

Mailing Address 806 NW 22nd St

City  
Gainesville

State  
FL

Zip Code  
32603-1037

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
University of Florida

Occupation (for Individual)  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG5CJ8**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. White, Ethan, , ,**

Mailing Address 806 NW 22nd St

City  
Gainesville

State  
FL

Zip Code  
32603-1037

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
University of Florida

Occupation (for Individual)  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

700.00

Date of Receipt

**11** / **21** / **2018**

**Transaction ID : VTQZWHG9RK4**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

300.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. White, Evan, , ,**

Mailing Address 1261 Evergreen St

City  
San Diego

State  
CA

Zip Code  
92106-2567

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG5CZ0**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. White, Evan, , ,**

Mailing Address 1261 Evergreen St

City  
San Diego

State  
CA

Zip Code  
92106-2567

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

**11 / 09 / 2018**

**Transaction ID : VTQZWHG91M4**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. White, Evan, , ,**

Mailing Address 1261 Evergreen St

City  
San Diego

State  
CA

Zip Code  
92106-2567

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

304.00

Date of Receipt

**11 / 21 / 2018**

**Transaction ID : VTQZWHG9CT3**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

45.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Whiteside, Henry, , ,**

Mailing Address 5215 E Pioneer Fork Rd

City

Salt Lake City

State

UT

Zip Code

84108-1678

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1349.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG2H61**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Whiteside, Henry, , ,**

Mailing Address 5215 E Pioneer Fork Rd

City

Salt Lake City

State

UT

Zip Code

84108-1678

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1349.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG3XM4**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Whitlock, Susan, , ,**

Mailing Address 49 W 84th St

Apt 1

City

New York

State

NY

Zip Code

10024-4757

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

self

Occupation (for Individual)

editor/writer

Receipt For:

☐ Primary  
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG4BJ8**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1100.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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(check only one)

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Wiggins, Carl, , ,**

Mailing Address PO Box 11210

City  
Atlanta

State  
GA

Zip Code  
30310-0210

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
GSA

Occupation (for Individual)  
Mechanical Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG4799**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Wiley, Ruth, , ,**

Mailing Address 19025 Parkside St

City  
Detroit

State  
MI

Zip Code  
48221-2291

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG2Q80**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Williams, Catherine, , ,**

Mailing Address 9 River Valley Rnch

City  
White Heath

State  
IL

Zip Code  
61884-9350

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Self-Employed

Occupation (for Individual)  
Veterinarian

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1350.00

Date of Receipt

**10** / **26** / **2018**

**Transaction ID : VTQZWHG6DP1**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

550.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Williams, Catherine, , ,**

Mailing Address 9 River Valley Rnch

City  
White Heath

State  
IL

Zip Code  
61884-9350

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Veterinarian

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1350.00

Date of Receipt

**11** / **21** / **2018**

**Transaction ID : VTQZWHGCF40**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Williams, Lisa, , ,**

Mailing Address 2300 E Roy St

City  
Seattle

State  
WA

Zip Code  
98112-4124

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Kaiser Permanente

Occupation (for Individual)

Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG6652**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Williams, Lisa, , ,**

Mailing Address 2300 E Roy St

City  
Seattle

State  
WA

Zip Code  
98112-4124

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Kaiser Permanente

Occupation (for Individual)

Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

**11** / **21** / **2018**

**Transaction ID : VTQZWHGB8W5**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

450.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Willis, Standish, , ,**

Mailing Address 900 N Ridgeland Ave

City  
Oak Park

State  
IL

Zip Code  
60302-1441

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Law Office of Standish E. Willis

Occupation (for Individual)  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

**11** / **09** / **2018**

**Transaction ID : VTQZWHG8SJ2**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Win Justice**

Mailing Address 1536 U St NW

City  
Washington

State  
DC

Zip Code  
20009-3912

FEC ID number of contributing  
federal political committee.

**C** C00672394

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2114181.00

Date of Receipt

**10** / **22** / **2018**

**Transaction ID : VTQZWHG2472**

Amount of Each Receipt this Period

118000.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Win Justice**

Mailing Address 1536 U St NW

City  
Washington

State  
DC

Zip Code  
20009-3912

FEC ID number of contributing  
federal political committee.

**C** C00672394

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2114181.00

Date of Receipt

**10** / **26** / **2018**

**Transaction ID : VTQZWHG24D9**

Amount of Each Receipt this Period

281325.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

399425.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. Win Justice**

Mailing Address 1536 U St NW

City  
Washington

State  
DC

Zip Code  
20009-3912

FEC ID number of contributing  
federal political committee.

C

C00672394

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2114181.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 02 / 2018

**Transaction ID : VTQZWHG24E7**

Amount of Each Receipt this Period

174750.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. Winchester, Elizabeth, , ,**

Mailing Address 6577 S Gallup St

City  
Littleton

State  
CO

Zip Code  
80120-3311

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
City of Littleton

Occupation (for Individual)  
Citizenship Program Coordinator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 09 / 2018

**Transaction ID : VTQZWHG8TG7**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. Winograd, Carol, , ,**

Mailing Address 746 Esplanada Way

City  
Stanford

State  
CA

Zip Code  
94305-1073

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 21 / 2018

**Transaction ID : VTQZWHGCTZ6**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

176000.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Winston, Joe, , ,**

Mailing Address 2311 W Berwyn Ave

City  
Chicago

State  
IL

Zip Code  
60625-1120

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Ow Myeye Productions Inc.

Occupation (for Individual)  
Filmmaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG2AT5**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Winston, Joe, , ,**

Mailing Address 2311 W Berwyn Ave

City  
Chicago

State  
IL

Zip Code  
60625-1120

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Ow Myeye Productions Inc.

Occupation (for Individual)  
Filmmaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**11 / 21 / 2018**

**Transaction ID : VTQZWHG9YC1**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Wishcamper, Jennifer, , ,**

Mailing Address 1467 E 55th Pl

City  
Chicago

State  
IL

Zip Code  
60637-1875

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Self-Employed

Occupation (for Individual)  
Costume Designer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5100.00

Date of Receipt

**11 / 21 / 2018**

**Transaction ID : VTQZWHGAY47**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

200.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Witty, Joanne, , ,**

Mailing Address 77 Columbia Hts

City  
Brooklyn

State  
NY

Zip Code  
11201-1305

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

**10 / 19 / 2018**

**Transaction ID : VTQZWHG52N2**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Wofsy, Leon, , ,**

Mailing Address 3009 Triumph Dr

City  
Alameda

State  
CA

Zip Code  
94501-1151

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**10 / 26 / 2018**

**Transaction ID : VTQZWHG7A59**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Wofsy, Leon, , ,**

Mailing Address 3009 Triumph Dr

City  
Alameda

State  
CA

Zip Code  
94501-1151

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**11 / 09 / 2018**

**Transaction ID : VTQZWHG8SA9**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1100.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Wood, Marcie, , ,**

Mailing Address 309 S 51st St

City  
Philadelphia

State  
PA

Zip Code  
19143-1605

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Self

Occupation (for Individual)  
Marriage and Family Therapist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**11 / 21 / 2018**

**Transaction ID : VTQZWHGA796**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Woodcock, Charlene, , ,**

Mailing Address 2355 Virginia St

City  
Berkeley

State  
CA

Zip Code  
94709-1315

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

**11 / 09 / 2018**

**Transaction ID : VTQZWHG8HM9**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Worth, Eleanor, , ,**

Mailing Address 360 Riverside Dr  
Apt 2AA

City  
New York

State  
NY

Zip Code  
10025-2740

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Not Employed

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**11 / 02 / 2018**

**Transaction ID : VTQZWHG80N3**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

325.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 229 OF 313

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Zagrean, Cleopatra, , ,**

Mailing Address 10 Ocean Pkwy  
Apt C15

City  
Brooklyn

State  
NY

Zip Code  
11218-1510

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Bloom Court LLC

Occupation (for Individual)  
Self employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

11 / 02 / 2018

**Transaction ID : VTQZWHG89A4**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Zieger, Robert E, , ,**

Mailing Address 1405 E M Franklin Ave

City  
Austin

State  
TX

Zip Code  
78721-1127

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Santa Cruz Cooperative School

Occupation (for Individual)  
Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

10 / 19 / 2018

**Transaction ID : VTQZWHG4N24**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Zieger, Robert E, , ,**

Mailing Address 1405 E M Franklin Ave

City  
Austin

State  
TX

Zip Code  
78721-1127

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Santa Cruz Cooperative School

Occupation (for Individual)  
Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

11 / 21 / 2018

**Transaction ID : VTQZWHGDBJ0**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

375.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 230 OF 313

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Zorn, Lynn, , ,**

Mailing Address 197 Morse Rd

City  
South Royalton

State  
VT

Zip Code  
05068-4442

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
self

Occupation (for Individual)  
writer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG2K49**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Zorn, Lynn, , ,**

Mailing Address 197 Morse Rd

City  
South Royalton

State  
VT

Zip Code  
05068-4442

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
self

Occupation (for Individual)  
writer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

**10** / **19** / **2018**

**Transaction ID : VTQZWHG38A1**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Zuniga, Roy, , ,**

Mailing Address 215 N Aberdeen St  
Unit 404B

City  
Chicago

State  
IL

Zip Code  
60607-1631

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Shoppertrak

Occupation (for Individual)  
Software Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**10** / **26** / **2018**

**Transaction ID : VTQZWHG70K8**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

**SUBTOTAL** of Receipts This Page (optional)..... ►

850.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 231 OF 313

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**ColorOfChange PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Zwick, Gillian, , ,**

Mailing Address 3811 N Figueroa St  
Apt 30

City  
Los Angeles

State  
CA

Zip Code  
90065-3162

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Costume Designer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1016.00

Date of Receipt

**10 / 26 / 2018**

**Transaction ID : VTQZWHG6MW4**

Amount of Each Receipt this Period

4.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

4.00

819376.57

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 232 OF 313

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. Delta Airlines**

Mailing Address 1030 Delta Blvd

City  
AtlantaState  
GAZip Code  
30354-1989Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		01		2018

FEC Identification Number

C

Transaction ID : VTQ0M9VTZl

Amount of Each Disbursement this Period

212.20

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Delta Airlines**

Mailing Address 1030 Delta Blvd

City  
AtlantaState  
GAZip Code  
30354-1989Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		05		2018

FEC Identification Number

C

Transaction ID : VTQ0M9VV0R

Amount of Each Disbursement this Period

357.20

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
-----	---	-----	---	-------------

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

569.40

**TOTAL** This Period (last page this line number only)..... ►

569.40



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 233 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address PO Box 382110

City  
CambridgeState  
MAZip Code  
02238-2110Purpose of Disbursement  
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	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	9			2	0	1	8		

FEC Identification Number

C

Transaction ID : VTQ0M9VTP!

Amount of Each Disbursement this Period

2841.91

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services**

Mailing Address PO Box 382110

City  
CambridgeState  
MAZip Code  
02238-2110Purpose of Disbursement  
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	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	9			2	0	1	8		

FEC Identification Number

C

Transaction ID : VTQ0M9VTP6

Amount of Each Disbursement this Period

2075.92

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ActBlue Technical Services**

Mailing Address PO Box 382110

City  
CambridgeState  
MAZip Code  
02238-2110Purpose of Disbursement  
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	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	6			2	0	1	8		

FEC Identification Number

C

Transaction ID : VTQ0M9VTP

Amount of Each Disbursement this Period

683.35

Non-Contribution Account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5601.18

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 234 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address PO Box 382110

City  
CambridgeState  
MAZip Code  
02238-2110Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		26		2018

FEC Identification Number

C

Transaction ID : VTQ0M9VTP

Amount of Each Disbursement this Period

1300.55

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services**

Mailing Address PO Box 382110

City  
CambridgeState  
MAZip Code  
02238-2110Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		02		2018

FEC Identification Number

C

Transaction ID : VTQ0M9VTPE

Amount of Each Disbursement this Period

496.09

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ActBlue Technical Services**

Mailing Address PO Box 382110

City  
CambridgeState  
MAZip Code  
02238-2110Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		09		2018

FEC Identification Number

C

Transaction ID : VTQ0M9VTP

Amount of Each Disbursement this Period

657.69

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

2454.33

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 235 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. ActBlue Technical Services**

Mailing Address PO Box 382110

City  
CambridgeState  
MAZip Code  
02238-2110Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			09			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VTP

Amount of Each Disbursement this Period

459.44

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ActBlue Technical Services**

Mailing Address PO Box 382110

City  
CambridgeState  
MAZip Code  
02238-2110Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			16			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VTP

Amount of Each Disbursement this Period

112.66

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ActBlue Technical Services**

Mailing Address PO Box 382110

City  
CambridgeState  
MAZip Code  
02238-2110Purpose of Disbursement  
Credit Card Processing Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			21			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VTQ

Amount of Each Disbursement this Period

6173.47

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

6745.57

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 236 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. AirBNB**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		26		2018

Mailing Address 888 Brannan St

City  
San FranciscoState  
CAZip Code  
94103-4928Purpose of Disbursement  
Lodging

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9VTX\

Amount of Each Disbursement this Period

584.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Amalgamated Bank**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		05		2018

Mailing Address 275 7th Ave  
FI 8City  
New YorkState  
NYZip Code  
10001-6995Purpose of Disbursement  
Bank Fees

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9VV39

Amount of Each Disbursement this Period

1.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Amalgamated Bank**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		16		2018

Mailing Address 275 7th Ave  
FI 8City  
New YorkState  
NYZip Code  
10001-6995Purpose of Disbursement  
Bank Fees

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9VTX

Amount of Each Disbursement this Period

16.00

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

601.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 237 OF 313

<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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. Amalgamated Bank**Mailing Address 275 7th Ave  
FI 8City  
New YorkState  
NYZip Code  
10001-6995Purpose of Disbursement  
Bank Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			16			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VV04

Amount of Each Disbursement this Period

185.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. American Airlines**

Mailing Address 4333 Amon Carter Blvd

City  
Fort WorthState  
TXZip Code  
76155-2664Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			25			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VT0V

Amount of Each Disbursement this Period

376.20

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. American Airlines**

Mailing Address 4333 Amon Carter Blvd

City  
Fort WorthState  
TXZip Code  
76155-2664Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			05			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VV0.

Amount of Each Disbursement this Period

75.00

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

636.20

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 238 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. American Airlines**

Mailing Address 4333 Amon Carter Blvd

City  
Fort WorthState  
TXZip Code  
76155-2664Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			26			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VTX

Amount of Each Disbursement this Period

1145.60

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. American Airlines**

Mailing Address 4333 Amon Carter Blvd

City  
Fort WorthState  
TXZip Code  
76155-2664Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			26			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VTX

Amount of Each Disbursement this Period

294.40

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Amuzie, Charles, , ,**

Mailing Address 1714 Franklin St

City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Salary

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VV4

Amount of Each Disbursement this Period

2866.77

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

4306.77

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 239 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. Amuzie, Charles, , ,**

Mailing Address 1714 Franklin St

City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Salary

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
11			15			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VV4

Amount of Each Disbursement this Period

2677.46

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Analyst Institute**

Mailing Address 815 16th St NW

City  
WashingtonState  
DCZip Code  
20006-4101Purpose of Disbursement  
Strategic Consulting Services

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
11			05			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VV3

Amount of Each Disbursement this Period

37500.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Analyst Institute**

Mailing Address 815 16th St NW

City  
WashingtonState  
DCZip Code  
20006-4101Purpose of Disbursement  
Strategic Consulting Services

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
11			06			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VV2

Amount of Each Disbursement this Period

21000.00

Non-Contribution Account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

61177.46

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 240 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Andrews, Viesha, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2018

Mailing Address 19741 SW 124th Ct

City  
MiamiState  
FLZip Code  
33177-4935Purpose of Disbursement  
Strategic Consulting Services

Candidate Name

Category/  
TypeOffice 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:

FEC Identification Number

C

Transaction ID : VTQ0M9VSAI

Amount of Each Disbursement this Period

303.75

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Andrews, Viesha, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2018

Mailing Address 19741 SW 124th Ct

City  
MiamiState  
FLZip Code  
33177-4935Purpose of Disbursement  
Strategic Consulting Services

Candidate Name

Category/  
TypeOffice 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:

FEC Identification Number

C

Transaction ID : VTQ0M9VT1C

Amount of Each Disbursement this Period

675.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Andrews, Viesha, , ,

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		13		2018

Mailing Address 19741 SW 124th Ct

City  
MiamiState  
FLZip Code  
33177-4935Purpose of Disbursement  
Strategic Consulting Services

Candidate Name

Category/  
TypeOffice 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:

FEC Identification Number

C

Transaction ID : VTQ0M9VV0

Amount of Each Disbursement this Period

1512.00

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

2490.75



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 241 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. AT&T**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		06		2018

Mailing Address 32 Avenue Of The Americas

City  
New YorkState  
NYZip Code  
10013-2473Purpose of Disbursement  
Telecommunication Services

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9VV2I

Amount of Each Disbursement this Period

1460.54

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Big Dawg**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		13		2018

Mailing Address 640 Dr Mary McLeod Bethune Blvd

City  
Daytona BeachState  
FLZip Code  
32114-3012Purpose of Disbursement  
DJ Services at Event

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9VV19

Amount of Each Disbursement this Period

300.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Brown, Scott, , ,**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		31		2018

Mailing Address 1714 Franklin St

City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Salary

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9VV4I

Amount of Each Disbursement this Period

2379.60

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

4140.14

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 242 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. Brown, Scott, , ,**

Mailing Address 1714 Franklin St

City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Reimbursement - Travel Expenses

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
11			07			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VV12

Amount of Each Disbursement this Period

1100.34

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Brown, Scott, , ,**

Mailing Address 1714 Franklin St

City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Salary

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
11			15			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VV4E

Amount of Each Disbursement this Period

2326.72

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Brown, Scott, , ,**

Mailing Address 1714 Franklin St

City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Reimbursement - Travel Expenses

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
11			16			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VV0I

Amount of Each Disbursement this Period

1002.11

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4429.17

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 243 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. BWI Hourly Garage**

Mailing Address 7035 Elm Rd

City  
BaltimoreState  
MDZip Code  
21240-1004Purpose of Disbursement  
Parking

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			13			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VV1E

Amount of Each Disbursement this Period

180.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Carey Car Service**Mailing Address 4530 Wisconsin Ave NW  
Ste 500City  
WashingtonState  
DCZip Code  
20016-4643Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			30			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VTYI

Amount of Each Disbursement this Period

181.51

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Carey Car Service**Mailing Address 4530 Wisconsin Ave NW  
Ste 500City  
WashingtonState  
DCZip Code  
20016-4643Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			05			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VV0I

Amount of Each Disbursement this Period

181.51

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

543.02

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 244 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. Carey Car Service**Mailing Address 4530 Wisconsin Ave NW  
Ste 500City  
WashingtonState  
DCZip Code  
20016-4643Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			06			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VV25

Amount of Each Disbursement this Period

158.88

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Carey Car Service**Mailing Address 4530 Wisconsin Ave NW  
Ste 500City  
WashingtonState  
DCZip Code  
20016-4643Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			08			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VV1V

Amount of Each Disbursement this Period

748.01

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Cason, Jacinda, , ,**

Mailing Address 1623 Electric Ave

City  
Lincoln ParkState  
MIZip Code  
48146-1907Purpose of Disbursement  
Canvass Director

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			29			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VTY

Amount of Each Disbursement this Period

3000.00

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

3906.89

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 245 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. Cason, Jacinda, , ,**

Mailing Address 1623 Electric Ave

City  
Lincoln ParkState  
MIZip Code  
48146-1907Purpose of Disbursement  
Canvass Director

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
11		20		2018

FEC Identification Number

**C**

Transaction ID : VTQ0M9VV9/

Amount of Each Disbursement this Period

3000.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Cepeida, Mojarro, , ,**

Mailing Address 1714 Franklin St

City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Salary

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
10		31		2018

FEC Identification Number

**C**

Transaction ID : VTQ0M9VV4F

Amount of Each Disbursement this Period

5538.24

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Cepeida, Mojarro, , ,**

Mailing Address 1714 Franklin St

City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Salary

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
11		15		2018

FEC Identification Number

**C**

Transaction ID : VTQ0M9VV4I

Amount of Each Disbursement this Period

5076.72

Non-Contribution Account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

13614.96

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 246 OF 313

<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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. Cepeida, Victoria, , ,**Mailing Address 1714 Franklin St  
# 100-136City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		19		2018

FEC Identification Number

**C**

Transaction ID : VTQ0M9VT00

Amount of Each Disbursement this Period

450.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Cepeida, Victoria, , ,**Mailing Address 1714 Franklin St  
# 100-136City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Travel Stipend

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		05		2018

FEC Identification Number

**C**

Transaction ID : VTQ0M9VV2T

Amount of Each Disbursement this Period

600.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Chappin, Kwesi, , ,**

Mailing Address 1714 Franklin St

City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Salary

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		31		2018

FEC Identification Number

**C**

Transaction ID : VTQ0M9VV4I

Amount of Each Disbursement this Period

5229.12

Non-Contribution Account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6279.12

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 247 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. Chappin, Kwesi, , ,**

Mailing Address 1714 Franklin St

City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Travel Stipend

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			06			2018			

FEC Identification Number

**C**

Transaction ID : VTQ0M9VV2E

Amount of Each Disbursement this Period

625.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Chappin, Kwesi, , ,**

Mailing Address 1714 Franklin St

City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Salary

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2018			

FEC Identification Number

**C**

Transaction ID : VTQ0M9VV4J

Amount of Each Disbursement this Period

4793.36

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Chappin, Kwesi, , ,**

Mailing Address 1714 Franklin St

City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Travel Stipend

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			20			2018			

FEC Identification Number

**C**

Transaction ID : VTQ0M9VTZ

Amount of Each Disbursement this Period

100.00

Non-Contribution Account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5518.36

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 248 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Collins, Jeffrey, , ,

Mailing Address 166 Athol Ave.

City  
WashingtonState  
DCZip Code  
20009Purpose of Disbursement  
Salary

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VV4

Amount of Each Disbursement this Period

560.56

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ColorOfChange.org

Mailing Address 1714 Franklin St  
# 100-136City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Salaries, Taxes and Benefits

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VV3

Amount of Each Disbursement this Period

95009.72

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ColorOfChange.org

Mailing Address 1714 Franklin St  
# 100-136City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Salaries, Taxes and Benefits

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VV3

Amount of Each Disbursement this Period

85441.67

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

181011.95

TOTAL This Period (last page this line number only).....▶



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 249 OF 313

<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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. Conner, Patrick, , ,**

Mailing Address 124 S Calle Diaz

City  
AnaheimState  
CAZip Code  
92807-3907Purpose of Disbursement  
Admin Support Services

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
10			18			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VSAI

Amount of Each Disbursement this Period

1500.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Conner, Patrick, , ,**

Mailing Address 124 S Calle Diaz

City  
AnaheimState  
CAZip Code  
92807-3907Purpose of Disbursement  
Admin Support Services

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
10			25			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VT17

Amount of Each Disbursement this Period

1500.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Conner, Patrick, , ,**

Mailing Address 124 S Calle Diaz

City  
AnaheimState  
CAZip Code  
92807-3907Purpose of Disbursement  
Admin Support Services

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
11			05			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VV2:

Amount of Each Disbursement this Period

1500.00

Non-Contribution Account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4500.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 250 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. Conner, Patrick, , ,**

Mailing Address 124 S Calle Diaz

City  
AnaheimState  
CAZip Code  
92807-3907Purpose of Disbursement  
Admin Support Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
11		13		2018

FEC Identification Number

C

Transaction ID : VTQ0M9VV11

Amount of Each Disbursement this Period

1500.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Conner, Patrick, , ,**

Mailing Address 124 S Calle Diaz

City  
AnaheimState  
CAZip Code  
92807-3907Purpose of Disbursement  
Admin Support Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
11		16		2018

FEC Identification Number

C

Transaction ID : VTQ0M9VV09

Amount of Each Disbursement this Period

1500.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Conner, Patrick, , ,**

Mailing Address 124 S Calle Diaz

City  
AnaheimState  
CAZip Code  
92807-3907Purpose of Disbursement  
Admin Support Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
11		21		2018

FEC Identification Number

C

Transaction ID : VTQ0M9VTZ

Amount of Each Disbursement this Period

1500.00

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

4500.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 251 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. Connolly, Jeremy, , ,**

Mailing Address 42 Delevan St

City  
BrooklynState  
NYZip Code  
11231-1808Purpose of Disbursement  
Refund

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
10			19			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VTRI

Amount of Each Disbursement this Period

510.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Criss, Clarice, , ,**

Mailing Address 1714 Franklin St

City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Travel Stipend

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
11			05			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VV3E

Amount of Each Disbursement this Period

325.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Criss, Clarice, , ,**

Mailing Address 1714 Franklin St

City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Travel Stipend

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
11			06			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VV2I

Amount of Each Disbursement this Period

550.00

Non-Contribution Account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1385.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 252 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. Dean, Sadie, , ,**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		25		2018

Mailing Address 1714 Franklin St  
Ste 136City  
OaklandState  
CAZip Code  
94612-3409Purpose of Disbursement  
Travel

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9VT19

Amount of Each Disbursement this Period

100.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Dean, Sadie, , ,**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		20		2018

Mailing Address 1714 Franklin St  
Ste 136City  
OaklandState  
CAZip Code  
94612-3409Purpose of Disbursement  
Reimbursement - Travel Expenses

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9VTZC

Amount of Each Disbursement this Period

171.14

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Dean, Sadie, , ,**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		21		2018

Mailing Address 1714 Franklin St  
Ste 136City  
OaklandState  
CAZip Code  
94612-3409Purpose of Disbursement  
Reimbursement - Travel Expenses

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9VTY

Amount of Each Disbursement this Period

439.28

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

710.42

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 253 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. Delta Airlines**

Mailing Address 1030 Delta Blvd

City  
AtlantaState  
GAZip Code  
30354-1989Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		18		2018

FEC Identification Number

C

Transaction ID : VTQ0M9VS9

Amount of Each Disbursement this Period

493.20

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Delta Airlines**

Mailing Address 1030 Delta Blvd

City  
AtlantaState  
GAZip Code  
30354-1989Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		18		2018

FEC Identification Number

C

Transaction ID : VTQ0M9VS9X

Amount of Each Disbursement this Period

493.20

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Delta Airlines**

Mailing Address 1030 Delta Blvd

City  
AtlantaState  
GAZip Code  
30354-1989Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		18		2018

FEC Identification Number

C

Transaction ID : VTQ0M9VSA

Amount of Each Disbursement this Period

59.99

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1046.39

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 254 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. Delta Airlines**

Mailing Address 1030 Delta Blvd

City  
AtlantaState  
GAZip Code  
30354-1989Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		01		2018

FEC Identification Number

C

Transaction ID : VTQ0M9VTZI

Amount of Each Disbursement this Period

787.20

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Delta Airlines**

Mailing Address 1030 Delta Blvd

City  
AtlantaState  
GAZip Code  
30354-1989Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		01		2018

FEC Identification Number

C

Transaction ID : VTQ0M9VTZI

Amount of Each Disbursement this Period

787.20

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Delta Airlines**

Mailing Address 1030 Delta Blvd

City  
AtlantaState  
GAZip Code  
30354-1989Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		05		2018

FEC Identification Number

C

Transaction ID : VTQ0M9VV0I

Amount of Each Disbursement this Period

468.20

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

2042.60

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 255 OF 313

<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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. Edwards, Jennifer, , ,**

Mailing Address 1714 Franklin St

City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Travel Stipend

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			05			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VV3

Amount of Each Disbursement this Period

125.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Evans & Katz, LLC**

Mailing Address PO Box 75357

City  
WashingtonState  
DCZip Code  
20013-0357Purpose of Disbursement  
Compliance Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			20			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VTZX

Amount of Each Disbursement this Period

4086.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Fedex Office**

Mailing Address 300 Lakeside Dr

City  
OaklandState  
CAZip Code  
94612-3534Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			05			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VV3

Amount of Each Disbursement this Period

69.55

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

4280.55

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 256 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. Fenton Communication**Mailing Address 630 9th Ave  
Ste 910City  
New YorkState  
NYZip Code  
10036-3745Purpose of Disbursement  
Communication Consulting Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			05			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VV3E

Amount of Each Disbursement this Period

6000.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Fortin, Candice, , ,**

Mailing Address 1714 Franklin St

City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Travel Stipend

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			25			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VT10

Amount of Each Disbursement this Period

100.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Fortin, Candice, , ,**

Mailing Address 1714 Franklin St

City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Reimbursement - Travel Expenses

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			20			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VTZ

Amount of Each Disbursement this Period

189.44

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

6289.44



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 257 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. Fortunak, Sharon, , ,**Mailing Address 825 Berry St  
Apt 107City  
Saint PaulState  
MNZip Code  
55114-1168Purpose of Disbursement  
Refund

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
10		19		2018

FEC Identification Number

C

Transaction ID : VTQ0M9VTR!

Amount of Each Disbursement this Period

2000.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FPL**

Mailing Address General Mail Facility

City  
MiamiState  
FLZip Code  
33188-0001Purpose of Disbursement  
Utilities

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
11		06		2018

FEC Identification Number

C

Transaction ID : VTQ0M9VV2F

Amount of Each Disbursement this Period

169.29

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Freeman Insurance**Mailing Address 1035 San Pablo Ave  
Ste 1City  
AlbanyState  
CAZip Code  
94706-2276Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
10		18		2018

FEC Identification Number

C

Transaction ID : VTQ0M9VS9'

Amount of Each Disbursement this Period

302.26

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

2471.55

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 258 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. Gaspard, Charlotte, , ,**

Mailing Address 75 Hudson Ave

City  
BrooklynState  
NYZip Code  
11201-1221Purpose of Disbursement  
Refund

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			21			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VTR

Amount of Each Disbursement this Period

800.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Goodman, Keith, , ,**Mailing Address 1714 Franklin St  
# 100-136City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Strategic Consulting Services

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			16			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VV0A

Amount of Each Disbursement this Period

15700.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Herring, Andre, , ,**

Mailing Address 1714 Franklin St

City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Reimbursement - Travel Expenses

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			05			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VV3.

Amount of Each Disbursement this Period

354.11

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

16854.11

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 259 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. Herring, Andre, , ,**

Mailing Address 1714 Franklin St

City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Travel Stipend

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			16			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VV0C

Amount of Each Disbursement this Period

125.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Hertz Rent a Car**

Mailing Address PO Box 261200

City  
Oklahoma CityState  
OKZip Code  
73126Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			23			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VT0P

Amount of Each Disbursement this Period

842.10

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Hertz Rent a Car**

Mailing Address PO Box 261200

City  
Oklahoma CityState  
OKZip Code  
73126Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			25			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VT0P

Amount of Each Disbursement this Period

338.00

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1305.10

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 260 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. Hertz Rent a Car**

Mailing Address PO Box 261200

City  
Oklahoma CityState  
OKZip Code  
73126Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			09			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VV1C

Amount of Each Disbursement this Period

503.12

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Hertz Rent a Car**

Mailing Address PO Box 261200

City  
Oklahoma CityState  
OKZip Code  
73126Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			09			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VV1V

Amount of Each Disbursement this Period

741.35

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Hertz Rent a Car**

Mailing Address PO Box 261200

City  
Oklahoma CityState  
OKZip Code  
73126Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			19			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VV0:

Amount of Each Disbursement this Period

1281.84

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

2526.31

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 261 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. Hofmans, Tatiana, , ,**

Mailing Address 620 E 17th St

City  
OaklandState  
CAZip Code  
94606-2594Purpose of Disbursement  
Space Rental

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		29		2018

FEC Identification Number

C

Transaction ID : VTQ0M9VTY

Amount of Each Disbursement this Period

1000.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Hofmans, Tatiana, , ,**

Mailing Address 620 E 17th St

City  
OaklandState  
CAZip Code  
94606-2594Purpose of Disbursement  
Space Rental

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		29		2018

FEC Identification Number

C

Transaction ID : VTQ0M9VTY

Amount of Each Disbursement this Period

500.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Hofmans, Tatiana, , ,**

Mailing Address 620 E 17th St

City  
OaklandState  
CAZip Code  
94606-2594Purpose of Disbursement  
Space Rental

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		29		2018

FEC Identification Number

C

Transaction ID : VTQ0M9VTY

Amount of Each Disbursement this Period

500.00

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

2000.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 262 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. Hofmans, Tatiana, , ,**

Mailing Address 620 E 17th St

City  
OaklandState  
CAZip Code  
94606-2594Purpose of Disbursement  
Travel Stipend

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			20			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VTZ

Amount of Each Disbursement this Period

400.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. IB5K LLC**Mailing Address 319 Lafayette St  
Unit 195City  
New YorkState  
NYZip Code  
10012-2711Purpose of Disbursement  
Web and Mobile Developing

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			13			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VV16

Amount of Each Disbursement this Period

3750.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Influential Data**Mailing Address 600 Pennsylvania Ave SE  
Ste 400City  
WashingtonState  
DCZip Code  
20003-4350Purpose of Disbursement  
Data Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			20			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VTZ

Amount of Each Disbursement this Period

1200.00

Non-Contribution Account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5350.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 263 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Irving, Allen, , ,

Mailing Address 1714 Franklin St

City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Travel Stipend

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		25		2018

FEC Identification Number

C

Transaction ID : VTQ0M9VVB

Amount of Each Disbursement this Period

250.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Irving, Allen, , ,

Mailing Address 1714 Franklin St

City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Salary

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		31		2018

FEC Identification Number

C

Transaction ID : VTQ0M9VV45

Amount of Each Disbursement this Period

2815.68

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Irving, Allen, , ,

Mailing Address 1714 Franklin St

City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Travel Stipend

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		05		2018

FEC Identification Number

C

Transaction ID : VTQ0M9VV3

Amount of Each Disbursement this Period

400.00

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3465.68

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 264 OF 313

<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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. Irving, Allen, , ,**

Mailing Address 1714 Franklin St

City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Salary

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			15			2018					

FEC Identification Number

**C** 

Transaction ID : VTQ0M9VV46

Amount of Each Disbursement this Period

 2581.04

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Jackson, Contessa, , ,**

Mailing Address 1714 Franklin St

City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Travel Stipend

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			25			2018					

FEC Identification Number

**C** 

Transaction ID : VTQ0M9VT11

Amount of Each Disbursement this Period

 150.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Jackson, Contessa, , ,**

Mailing Address 1714 Franklin St

City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Travel Stipend

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			06			2018					

FEC Identification Number

**C** 

Transaction ID : VTQ0M9VV21

Amount of Each Disbursement this Period

 125.00

Non-Contribution Account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶ 2856.04



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 265 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. JetBlue**

Mailing Address 11829 Queens Blvd

City  
Forest HillsState  
NYZip Code  
11375-7212Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			24			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VT05

Amount of Each Disbursement this Period

1525.24

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Kicklighter, Graham, , ,**Mailing Address 6700 Roswell Rd  
Apt 4BCity  
AtlantaState  
GAZip Code  
30328-2521Purpose of Disbursement  
Sound Mixing Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			07			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VV24

Amount of Each Disbursement this Period

800.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Lathia, Bhavik, , ,**

Mailing Address 1714 Franklin St

City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Travel Stipend

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			16			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VV01

Amount of Each Disbursement this Period

150.00

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

2475.24

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 266 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. Le Montrose Suite**

Mailing Address 8440 W Sunset Blvd

City  
West HollywoodState  
CAZip Code  
90069-1912Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VTY2

Amount of Each Disbursement this Period

1402.69

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Leonard, Ashley, , ,**

Mailing Address 4103 Saint Clair Pl

City  
Temple HillsState  
MDZip Code  
20748-1629Purpose of Disbursement  
Event Planning Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			25			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VT0X

Amount of Each Disbursement this Period

1200.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Leonard, Ashley, , ,**

Mailing Address 4103 Saint Clair Pl

City  
Temple HillsState  
MDZip Code  
20748-1629Purpose of Disbursement  
Travel Stipend

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			25			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VT0'

Amount of Each Disbursement this Period

850.00

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

3452.69

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 267 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. Leonard, Ashley, , ,**

Mailing Address 4103 Saint Clair Pl

City  
Temple HillsState  
MDZip Code  
20748-1629Purpose of Disbursement  
Travel Stipend

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			25			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VT02

Amount of Each Disbursement this Period

100.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Leonard, Ashley, , ,**

Mailing Address 4103 Saint Clair Pl

City  
Temple HillsState  
MDZip Code  
20748-1629Purpose of Disbursement  
Event Planning Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			05			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VV3C

Amount of Each Disbursement this Period

1000.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Magnus, Jade, , ,**Mailing Address 3900 Adeline St  
Unit 312City  
OaklandState  
CAZip Code  
94608-3975Purpose of Disbursement  
Reimbursement - Travel Expenses

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			05			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VV3i

Amount of Each Disbursement this Period

779.80

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1879.80

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 268 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. Magnus, Jade, , ,**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		0	6			2	0	1	8		

Mailing Address 3900 Adeline St  
Unit 312City  
OaklandState  
CAZip Code  
94608-3975Purpose of Disbursement  
Travel Stipend

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9VV2.

Amount of Each Disbursement this Period

125.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Malone, Kortni, , ,**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	3			2	0	1	8		

Mailing Address 1714 Franklin St

City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Voided Payment from 10/5/2018

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9VV3T

Amount of Each Disbursement this Period

- 100.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Malone, Kortni, , ,**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	5			2	0	1	8		

Mailing Address 1714 Franklin St

City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Travel Stipend

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9VT1.

Amount of Each Disbursement this Period

100.00

Non-Contribution Account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

125.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 269 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. Malone, Quiana, , ,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		25		2018

Mailing Address 1714 Franklin St  
# 100-136City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Travel Stipend

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : VTQ0M9VT18

Amount of Each Disbursement this Period

150.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Malone, Quiana, , ,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		20		2018

Mailing Address 1714 Franklin St  
# 100-136City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Travel Stipend

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : VTQ0M9VTZL

Amount of Each Disbursement this Period

85.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Manalang Aquino, Tara-Patricia, , ,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		25		2018

Mailing Address 1908 Clinton St  
Apt 9City  
Los AngelesState  
CAZip Code  
90026-4159Purpose of Disbursement  
Videography Services

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : VTQ0M9VT11

Amount of Each Disbursement this Period

400.00

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

635.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 270 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. Manalang Aquino, Tara-Patricia, , ,**Mailing Address 1908 Clinton St  
Apt 9City  
Los AngelesState  
CAZip Code  
90026-4159Purpose of Disbursement  
Reimbursement - Travel Expenses

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			05			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VV21

Amount of Each Disbursement this Period

940.08

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Manalang Aquino, Tara-Patricia, , ,**Mailing Address 1908 Clinton St  
Apt 9City  
Los AngelesState  
CAZip Code  
90026-4159Purpose of Disbursement  
Videography Services

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			16			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VV05

Amount of Each Disbursement this Period

147.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MandyNorth**

Mailing Address 3395 Rowan Rd SW

City  
ConyersState  
GAZip Code  
30094-3450Purpose of Disbursement  
Delivery Services

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			05			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VV3:

Amount of Each Disbursement this Period

2500.00

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

3587.08

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 271 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. Marriott Orlando Downtown**

Mailing Address 400 W Livingston St

City  
OrlandoState  
FLZip Code  
32801-1414Purpose of Disbursement  
Lodging

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
11		07		2018

FEC Identification Number

C

Transaction ID : VTQ0M9VV2f

Amount of Each Disbursement this Period

415.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Marriott Orlando Downtown**

Mailing Address 400 W Livingston St

City  
OrlandoState  
FLZip Code  
32801-1414Purpose of Disbursement  
Lodging

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
11		08		2018

FEC Identification Number

C

Transaction ID : VTQ0M9VV1X

Amount of Each Disbursement this Period

62.51

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Mathias, John, , ,**Mailing Address 485 Canyon Oaks Dr  
Apt GCity  
OaklandState  
CAZip Code  
94605-3846Purpose of Disbursement  
Travel Stipend

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
11		07		2018

FEC Identification Number

C

Transaction ID : VTQ0M9VV2i

Amount of Each Disbursement this Period

125.00

Non-Contribution Account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

602.51
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 272 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. McDowell, Sandra, , ,**

Mailing Address 18240 NW 41st Pl

City  
Miami GardensState  
FLZip Code  
33055-3433Purpose of Disbursement  
Admin Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		18		2018

FEC Identification Number

C

Transaction ID : VTQ0M9VSA!

Amount of Each Disbursement this Period

81.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. McDowell, Sandra, , ,**

Mailing Address 18240 NW 41st Pl

City  
Miami GardensState  
FLZip Code  
33055-3433Purpose of Disbursement  
Admin Support Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		19		2018

FEC Identification Number

C

Transaction ID : VTQ0M9VSZ2

Amount of Each Disbursement this Period

810.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. McKelvey, Daniel, , ,**

Mailing Address 1714 Franklin St

City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Reimbursement - Travel Expenses

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		18		2018

FEC Identification Number

C

Transaction ID : VTQ0M9VSA

Amount of Each Disbursement this Period

494.96

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1385.96



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 273 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. McKelvey, Daniel, , ,**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		0	6		2	0	1	8		

Mailing Address 1714 Franklin St

City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Travel Stipend

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : VTQ0M9VV2f

Amount of Each Disbursement this Period

400.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Middle Seat**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		0	5		2	0	1	8		

Mailing Address PO Box 21600

City  
WashingtonState  
DCZip Code  
20009-9600Purpose of Disbursement  
Non-Federal Digital Advertising

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : VTQ0M9VV34

Amount of Each Disbursement this Period

5000.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Morris, Ashley, , ,**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		2	6		2	0	1	8		

Mailing Address 1714 Franklin St

City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Event Staffing Services

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : VTQ0M9VTX

Amount of Each Disbursement this Period

550.00

Non-Contribution Account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

5950.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 274 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. NGP VAN**

Mailing Address 1101 15th St NW

City  
WashingtonState  
DCZip Code  
20005-5006Purpose of Disbursement  
Software & Support Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			02			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VTZC

Amount of Each Disbursement this Period

625.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. NGP VAN**

Mailing Address 1101 15th St NW

City  
WashingtonState  
DCZip Code  
20005-5006Purpose of Disbursement  
Software and Support

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			20			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VTZF

Amount of Each Disbursement this Period

88.21

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Norwood, La'Nae, , ,**

Mailing Address 1714 Franklin St

City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Travel Stipend

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			25			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VT1!

Amount of Each Disbursement this Period

150.00

Non-Contribution Account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

863.21

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 275 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. Norwood, La'Nae, , ,**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		20		2018

Mailing Address 1714 Franklin St

City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Travel Stipend

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9VTZ

Amount of Each Disbursement this Period

625.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Olson Hagel & Fishburn, LLP**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		15		2018

Mailing Address 555 Capitol Mall  
Ste 400City  
SacramentoState  
CAZip Code  
95814-4503Purpose of Disbursement  
Legal Services

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9VV14

Amount of Each Disbursement this Period

386.74

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Olson Hagel & Fishburn, LLP**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		21		2018

Mailing Address 555 Capitol Mall  
Ste 400City  
SacramentoState  
CAZip Code  
95814-4503Purpose of Disbursement  
Legal Services

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9VTZ

Amount of Each Disbursement this Period

186.50

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

1198.24

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 276 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. One Minus Beta LLC**Mailing Address 25 N Downing St  
Unit 2-204City  
DenverState  
COZip Code  
80218-3468Purpose of Disbursement  
GOTV Direct Mail Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			05			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VV3:

Amount of Each Disbursement this Period

3750.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Only 1 Studios LLC**

Mailing Address 8325 NE 2nd Ave

City  
MiamiState  
FLZip Code  
33138-3815Purpose of Disbursement  
Videography Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			05			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VV31

Amount of Each Disbursement this Period

2200.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Onyeukwu, Marybeth, , ,**

Mailing Address 1714 Franklin St

City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Travel Stipend

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			06			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VV2.

Amount of Each Disbursement this Period

125.00

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

6075.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 277 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. Outlier Society, LLC**Mailing Address 16030 Ventura Blvd  
Ste 240City  
EncinoState  
CAZip Code  
91436-4487Purpose of Disbursement  
Travel

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
1	1			2	0			2	0	1	8		

FEC Identification Number

C

Transaction ID : VTQ0M9VTZ1

Amount of Each Disbursement this Period

548.89

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Petersen, Alexander, , ,**

Mailing Address 3142 McAfee Rd

City  
AtlantaState  
GAZip Code  
30332-0001Purpose of Disbursement  
Videography 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
1	1			0	7			2	0	1	8		

FEC Identification Number

C

Transaction ID : VTQ0M9VV23

Amount of Each Disbursement this Period

818.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Petty, Corina, , ,**

Mailing Address 150 Preakness Ln

City  
VallejoState  
CAZip Code  
94591-8517Purpose of Disbursement  
Travel Stipend

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
1	0			1	9			2	0	1	8		

FEC Identification Number

C

Transaction ID : VTQ0M9VSA

Amount of Each Disbursement this Period

400.00

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1766.89

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 278 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. Petty, Corina, , ,**

Mailing Address 150 Preakness Ln

City  
VallejoState  
CAZip Code  
94591-8517Purpose of Disbursement  
Travel Stipend

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
11			05			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VV3C

Amount of Each Disbursement this Period

250.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. PEX**Mailing Address 462 Fashion Ave  
FI 21City  
New YorkState  
NYZip Code  
10018-7422Purpose of Disbursement  
Advance for Pre-Paid Debit Card, Memo Items Will Be Prov. as Exp. Occur

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
10			25			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VV47

Amount of Each Disbursement this Period

100000.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. PEX**Mailing Address 462 Fashion Ave  
FI 21City  
New YorkState  
NYZip Code  
10018-7422Purpose of Disbursement  
Advance for Pre-Paid Debit Card, Memo Items Will Be Prov. as Exp. Occur

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
10			29			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VV4I

Amount of Each Disbursement this Period

50000.00

Non-Contribution Account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

150250.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 279 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. PEX**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			05			2018			

Mailing Address 462 Fashion Ave  
FI 21City  
New YorkState  
NYZip Code  
10018-7422Purpose of Disbursement  
Advance for Pre-Paid Debit Card, Memo Items Will Be Prov. as Exp. Occur

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9VV4/

Amount of Each Disbursement this Period

100000.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Powers, Alicia, , ,**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			06			2018			

Mailing Address 1714 Franklin St

City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Travel Stipend

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9VV2C

Amount of Each Disbursement this Period

125.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. QuickBase**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			22			2018			

Mailing Address 2632 Marine Way

City  
Mountain ViewState  
CAZip Code  
94043-1126Purpose of Disbursement  
Software

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9VT0.

Amount of Each Disbursement this Period

725.00

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

100850.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 280 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. QuickBase**

Mailing Address 2632 Marine Way

City  
Mountain ViewState  
CAZip Code  
94043-1126Purpose of Disbursement  
Software

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			20			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VTZZ

Amount of Each Disbursement this Period

725.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Reis, Timothy, , ,**

Mailing Address 1526 Dekalb Ave NE

City  
AtlantaState  
GAZip Code  
30307-2160Purpose of Disbursement  
Videography Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			13			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VV0X

Amount of Each Disbursement this Period

600.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Resonance Campaigns**

Mailing Address 1020 16th St NW

City  
WashingtonState  
DCZip Code  
20036-5713Purpose of Disbursement  
Non-Federal Production and Design Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			05			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VV2:

Amount of Each Disbursement this Period

47683.21

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

49008.21



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 281 OF 313

<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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. Roberts, Scott, , ,**

Mailing Address 1714 Franklin St

City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Voided Payment from 10/5/2018

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VV3F

Amount of Each Disbursement this Period

- 100.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Roberts, Scott, , ,**

Mailing Address 1714 Franklin St

City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Travel Stipend

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			16			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VV07

Amount of Each Disbursement this Period

100.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Robinson, Rashad, , ,**

Mailing Address 1714 Franklin St

City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Reimbursement - Travel Expenses

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			05			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VV2

Amount of Each Disbursement this Period

1642.14

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1642.14

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 282 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. Sanders, Dominique, , ,**

Mailing Address 1714 Franklin St

City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
10		25		2018

FEC Identification Number

C

Transaction ID : VTQ0M9VT12

Amount of Each Disbursement this Period

100.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Sandler, Reiff, Lamb, Rosenstein & Birkenstock, PC**Mailing Address 1090 Vermont Ave NW  
Ste 750City  
WashingtonState  
DCZip Code  
20005-4970Purpose of Disbursement  
Legal Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
11		05		2018

FEC Identification Number

C

Transaction ID : VTQ0M9VV2V

Amount of Each Disbursement this Period

5728.29

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Sandler, Reiff, Lamb, Rosenstein & Birkenstock, PC**Mailing Address 1090 Vermont Ave NW  
Ste 750City  
WashingtonState  
DCZip Code  
20005-4970Purpose of Disbursement  
Legal Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
11		20		2018

FEC Identification Number

C

Transaction ID : VTQ0M9VTZI

Amount of Each Disbursement this Period

7810.00

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

13638.29

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 283 OF 313

<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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. Southwest Airlines**

Mailing Address 2702 Love Field Dr

City  
DallasState  
TXZip Code  
75235-1908Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		18		2018

FEC Identification Number

C

Transaction ID : VTQ0M9VSAI

Amount of Each Disbursement this Period

1057.98

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Southwest Airlines**

Mailing Address 2702 Love Field Dr

City  
DallasState  
TXZip Code  
75235-1908Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		24		2018

FEC Identification Number

C

Transaction ID : VTQ0M9VT0R

Amount of Each Disbursement this Period

402.96

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Southwest Airlines**

Mailing Address 2702 Love Field Dr

City  
DallasState  
TXZip Code  
75235-1908Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		26		2018

FEC Identification Number

C

Transaction ID : VTQ0M9VT11

Amount of Each Disbursement this Period

75.00

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1535.94

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 284 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. Southwest Airlines**

Mailing Address 2702 Love Field Dr

City  
DallasState  
TXZip Code  
75235-1908Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
10		31		2018

FEC Identification Number

C

Transaction ID : VTQ0M9VTZ:

Amount of Each Disbursement this Period

1079.16

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Spirit Gift**Mailing Address 10 SW South River Dr  
# PHI-08City  
MiamiState  
FLZip Code  
33130-4800Purpose of Disbursement  
Gifts for Supporters

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
11		13		2018

FEC Identification Number

C

Transaction ID : VTQ0M9VV1E

Amount of Each Disbursement this Period

218.99

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Spirit Gift**Mailing Address 10 SW South River Dr  
# PHI-08City  
MiamiState  
FLZip Code  
33130-4800Purpose of Disbursement  
Gifts for Supporters

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y
11		13		2018

FEC Identification Number

C

Transaction ID : VTQ0M9VV1I

Amount of Each Disbursement this Period

401.97

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1700.12

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 285 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. Spirit Gift**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2018			

Mailing Address 10 SW South River Dr  
# PHI-08City  
MiamiState  
FLZip Code  
33130-4800Purpose of Disbursement  
Gifts for Supporters

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9VV0I

Amount of Each Disbursement this Period

138.99

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Staples**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			23			2018			

Mailing Address 217 Broadway

City  
New YorkState  
NYZip Code  
10007-2909Purpose of Disbursement  
Office Supplies

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9VTYS

Amount of Each Disbursement this Period

79.47

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Stitt, William, , ,**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			21			2018			

Mailing Address 6098 Oxbow Bend Ln

City  
Port OrangeState  
FLZip Code  
32128-7162Purpose of Disbursement  
Videography Services

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9VTY.

Amount of Each Disbursement this Period

250.00

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

468.46

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 286 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. Talbert, Shannon, , ,**

Mailing Address 1714 Franklin St

City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Travel Stipend

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			25			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VT14

Amount of Each Disbursement this Period

150.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Talbert, Shannon, , ,**

Mailing Address 1714 Franklin St

City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Travel Stipend

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			06			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VV28

Amount of Each Disbursement this Period

125.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Talbert, Shannon, , ,**

Mailing Address 1714 Franklin St

City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Travel Stipend

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			16			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VV01

Amount of Each Disbursement this Period

1110.00

Non-Contribution Account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1385.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 287 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. Toskr, Inc.**Mailing Address 1330 Broadway  
FI 3City  
OaklandState  
CAZip Code  
94612-2503Purpose of Disbursement  
Non-Federal Digital Communications

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			20			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VTZ7

Amount of Each Disbursement this Period

250.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Tramel, Alecia, M, ,**

Mailing Address 19202 NW 34th Ct

City  
Opa LockaState  
FLZip Code  
33056-2204Purpose of Disbursement  
Strategic Consulting Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			18			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VSA6

Amount of Each Disbursement this Period

1080.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Tramel, Alecia, M, ,**

Mailing Address 19202 NW 34th Ct

City  
Opa LockaState  
FLZip Code  
33056-2204Purpose of Disbursement  
Strategic Consulting Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			25			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VT01

Amount of Each Disbursement this Period

810.00

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

2140.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 288 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. Tramel, Alecia, M, ,**

Mailing Address 19202 NW 34th Ct

City  
Opa LockaState  
FLZip Code  
33056-2204Purpose of Disbursement  
Strategic Consulting Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		05		2018

FEC Identification Number

C

Transaction ID : VTQ0M9VV3I

Amount of Each Disbursement this Period

1080.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Tramel, Alecia, M, ,**

Mailing Address 19202 NW 34th Ct

City  
Opa LockaState  
FLZip Code  
33056-2204Purpose of Disbursement  
Strategic Consulting Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		16		2018

FEC Identification Number

C

Transaction ID : VTQ0M9VV0C

Amount of Each Disbursement this Period

2160.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Travis, Paige, , ,**Mailing Address 1714 Franklin St  
# 100-136City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Travel Stipend

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		05		2018

FEC Identification Number

C

Transaction ID : VTQ0M9VV3I

Amount of Each Disbursement this Period

200.00

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

3440.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 289 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. Travis, Paige, , ,**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			20			2018			

Mailing Address 1714 Franklin St  
# 100-136City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Travel Stipend

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : VTQ0M9VTZ

Amount of Each Disbursement this Period

200.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Travis, Paige, , ,**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			26			2018			

Mailing Address 1714 Franklin St  
# 100-136City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Travel Stipend

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : VTQ0M9VV29

Amount of Each Disbursement this Period

125.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Uber Technologies**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			19			2018			

Mailing Address 1440 Market St

City  
San FranciscoState  
CAZip Code  
94102-6004Purpose of Disbursement  
Travel

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : VTQ0M9VSA

Amount of Each Disbursement this Period

34.76

Non-Contribution Account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

359.76

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 290 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. Uber Technologies**

Mailing Address 1440 Market St

City  
San FranciscoState  
CAZip Code  
94102-6004Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			19			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VSAI

Amount of Each Disbursement this Period

5.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Uber Technologies**

Mailing Address 1440 Market St

City  
San FranciscoState  
CAZip Code  
94102-6004Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			22			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VT0N

Amount of Each Disbursement this Period

10.69

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Uber Technologies**

Mailing Address 1440 Market St

City  
San FranciscoState  
CAZip Code  
94102-6004Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			22			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VT0I

Amount of Each Disbursement this Period

25.47

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

41.16

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 291 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. Uber Technologies**

Mailing Address 1440 Market St

City  
San FranciscoState  
CAZip Code  
94102-6004Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			26			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VT1E

Amount of Each Disbursement this Period

28.50

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Uber Technologies**

Mailing Address 1440 Market St

City  
San FranciscoState  
CAZip Code  
94102-6004Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			26			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VT1F

Amount of Each Disbursement this Period

29.99

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Uber Technologies**

Mailing Address 1440 Market St

City  
San FranciscoState  
CAZip Code  
94102-6004Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			29			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VT4;

Amount of Each Disbursement this Period

27.57

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

86.06

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 292 OF 313

<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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. Uber Technologies**

Mailing Address 1440 Market St

City  
San FranciscoState  
CAZip Code  
94102-6004Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			29			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VT42

Amount of Each Disbursement this Period

81.07

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Uber Technologies**

Mailing Address 1440 Market St

City  
San FranciscoState  
CAZip Code  
94102-6004Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			30			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VTYH

Amount of Each Disbursement this Period

16.52

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Uber Technologies**

Mailing Address 1440 Market St

City  
San FranciscoState  
CAZip Code  
94102-6004Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			30			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VTY

Amount of Each Disbursement this Period

18.49

Non-Contribution Account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

116.08

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 293 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. Uber Technologies**

Mailing Address 1440 Market St

City  
San FranciscoState  
CAZip Code  
94102-6004Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			02			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VTZ1

Amount of Each Disbursement this Period

66.30

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Uber Technologies**

Mailing Address 1440 Market St

City  
San FranciscoState  
CAZip Code  
94102-6004Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			05			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VV0S

Amount of Each Disbursement this Period

26.01

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Uber Technologies**

Mailing Address 1440 Market St

City  
San FranciscoState  
CAZip Code  
94102-6004Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			05			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VV31

Amount of Each Disbursement this Period

121.98

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

214.29

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 294 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. Uber Technologies**

Mailing Address 1440 Market St

City  
San FranciscoState  
CAZip Code  
94102-6004Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			07			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VV25

Amount of Each Disbursement this Period

28.67

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. United Airlines**

Mailing Address 233 S Wacker Dr

City  
ChicagoState  
ILZip Code  
60606-6462Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			18			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VS9V

Amount of Each Disbursement this Period

275.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. United Airlines**

Mailing Address 233 S Wacker Dr

City  
ChicagoState  
ILZip Code  
60606-6462Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			18			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VS9

Amount of Each Disbursement this Period

200.00

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

503.67

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 295 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. Verizon Wireless**

Mailing Address 1 Verizon Way

City  
Basking RidgeState  
NJZip Code  
07920-1097Purpose of Disbursement  
Telecommunication Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		06		2018

FEC Identification Number

C

Transaction ID : VTQ0M9VV27

Amount of Each Disbursement this Period

316.18

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Walker, Alicia, , ,**Mailing Address 1714 Franklin St  
# 100-136City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Travel Stipend

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		19		2018

FEC Identification Number

C

Transaction ID : VTQ0M9VSZ5

Amount of Each Disbursement this Period

450.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Walker, Alicia, , ,**Mailing Address 1714 Franklin St  
# 100-136City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Travel Stipend

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		19		2018

FEC Identification Number

C

Transaction ID : VTQ0M9VSZ

Amount of Each Disbursement this Period

350.00

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1116.18

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 296 OF 313

<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)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. Walker, Alicia, , ,**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			05			2018			

Mailing Address 1714 Franklin St  
# 100-136City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Travel Stipend

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9VV3f

Amount of Each Disbursement this Period

328.48

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Walker, Alicia, , ,**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			26			2018			

Mailing Address 1714 Franklin St  
# 100-136City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Voided Payment from 10/5/2018

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9VV0f

Amount of Each Disbursement this Period

- 732.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Westin Southfield**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			26			2018			

Mailing Address 5400 W Century Blvd

City  
Los AngelesState  
CAZip Code  
90045-5975Purpose of Disbursement  
Travel

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : VTQ0M9VT1f

Amount of Each Disbursement this Period

595.78

Non-Contribution Account

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

192.26



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 297 OF 313

<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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

**A. Westin Southfield**

Mailing Address 5400 W Century Blvd

City  
Los AngelesState  
CAZip Code  
90045-5975Purpose of Disbursement  
Room Rental and Catering for Event

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
11			20			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VV01

Amount of Each Disbursement this Period

31729.88

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Williams, Bradley, , ,**

Mailing Address 1714 Franklin St

City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Travel Stipend

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
11			07			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VV22

Amount of Each Disbursement this Period

125.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Winkler, Matthew, , ,**Mailing Address 817 N Bunker Hill Ave  
Apt 1City  
Los AngelesState  
CAZip Code  
90012-1679Purpose of Disbursement  
Editing Services

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
10			25			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VT11

Amount of Each Disbursement this Period

600.00

Non-Contribution Account

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

32454.88

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 298 OF 313

<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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ColorOfChange PAC

Full Name (Last, First, Middle Initial)

A. Wood, Hope, , ,

Mailing Address 1714 Franklin St

City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Travel Stipend

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			25			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VT13

Amount of Each Disbursement this Period

115.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Wood, Hope, , ,

Mailing Address 1714 Franklin St

City  
OaklandState  
CAZip Code  
94612-3488Purpose of Disbursement  
Travel Stipend

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			20			2018			

FEC Identification Number

C

Transaction ID : VTQ0M9VTZV

Amount of Each Disbursement this Period

100.00

Non-Contribution Account

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	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).....▶

215.00

756394.18

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 299 OF 313  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>ColorOfChange PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00428557	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>ColorOfChange.org</b>			<input type="checkbox"/> Memo Item		
Mailing Address 1714 Franklin St # 100-136			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 18 / 2018		
City Oakland		State CA	Zip Code 94612-3488		
Purpose of Expenditure Canvassing Services		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>		Amount <span style="border: 1px solid black; padding: 2px;">374.41</span>	
Name of Federal Candidate: Nelson, Bill, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">7519.47</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ►		
Full Name of Payee <b>ColorOfChange.org</b>			<input type="checkbox"/> Memo Item		
Mailing Address 1714 Franklin St # 100-136			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 18 / 2018		
City Oakland		State CA	Zip Code 94612-3488		
Purpose of Expenditure Canvassing Services		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>		Amount <span style="border: 1px solid black; padding: 2px;">224.65</span>	
Name of Federal Candidate: Rosen, Jacky, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">5044.02</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ►		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">599.06</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
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  Savado, Ismael, , ,		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 06 / 2018	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 300 OF 313  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>ColorOfChange PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00428557	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>ColorOfChange.org</b>			<input type="checkbox"/> Memo Item		
Mailing Address 1714 Franklin St # 100-136			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 19 / 2018		
City Oakland		State CA	Zip Code 94612-3488		
Purpose of Expenditure Canvassing Services		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>		Amount <span style="border: 1px solid black; padding: 2px;">385.05</span>	
Name of Federal Candidate: Nelson, Bill, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">7519.47</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ►		
Full Name of Payee <b>ColorOfChange.org</b>			<input type="checkbox"/> Memo Item		
Mailing Address 1714 Franklin St # 100-136			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 19 / 2018		
City Oakland		State CA	Zip Code 94612-3488		
Purpose of Expenditure Canvassing Services		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>		Amount <span style="border: 1px solid black; padding: 2px;">224.65</span>	
Name of Federal Candidate: Rosen, Jacky, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">5044.02</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ►		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">609.70</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
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 <i>Savado, Ismael, , ,</i>		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 06 / 2018	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 301 OF 313  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>ColorOfChange PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00428557	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> Amends report filed on <span style="margin-left: 20px;">MM / DD / YYYY</span>					
Full Name of Payee <input type="checkbox"/> Memo Item <b>ColorOfChange.org</b>				Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 20 / 2018	
Mailing Address 1714 Franklin St # 100-136				Amount 374.41	
City Oakland		State CA	Zip Code 94612-3488	Transaction ID : VTQ0M9V4M66 Date of Disbursement or Obligation MM / DD / YYYY 10 / 20 / 2018	
Purpose of Expenditure Canvassing Services			Category/Type 004		
Name of Federal Candidate: Nelson, Bill, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose				Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: FL	
Calendar Year-To-Date Per Election for Office Sought 7519.47				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 <b>ColorOfChange.org</b>				Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 20 / 2018	
Mailing Address 1714 Franklin St # 100-136				Amount 360.80	
City Oakland		State CA	Zip Code 94612-3488	Transaction ID : VTQ0M9V6289 Date of Disbursement or Obligation MM / DD / YYYY 10 / 20 / 2018	
Purpose of Expenditure Canvassing Services			Category/Type 004		
Name of Federal Candidate: Rosen, Jacky, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose				Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: NV	
Calendar Year-To-Date Per Election for Office Sought 5044.02				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	
<b>(a) SUBTOTAL of Itemized Independent Expenditures .....</b>				735.21	
<b>(b) SUBTOTAL of Unitemized Independent Expenditures.....</b>					
<b>(c) TOTAL Independent Expenditures .....</b>					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Savado, Ismael, , ,</u>				Date <span style="margin-left: 20px;">MM / DD / YYYY</span> 12 / 06 / 2018	

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 302 OF 313  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>ColorOfChange PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00428557	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>ColorOfChange.org</b>			<input type="checkbox"/> Memo Item		
Mailing Address 1714 Franklin St # 100-136			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 21 / 2018		
City Oakland		State CA	Zip Code 94612-3488		
Purpose of Expenditure Canvassing Services		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>		Amount <span style="border: 1px solid black; padding: 2px;">253.03</span>	
Name of Federal Candidate: Rosen, Jacky, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">5044.02</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ►		
Full Name of Payee <b>ColorOfChange.org</b>			<input type="checkbox"/> Memo Item		
Mailing Address 1714 Franklin St # 100-136			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 21 / 2018		
City Oakland		State CA	Zip Code 94612-3488		
Purpose of Expenditure Canvassing Services		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>		Amount <span style="border: 1px solid black; padding: 2px;">374.41</span>	
Name of Federal Candidate: Nelson, Bill, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) _____		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">7519.47</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ►		
(a) SUBTOTAL of Itemized Independent Expenditures .....				<span style="border: 1px solid black; padding: 2px;">627.44</span>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				<span style="border: 1px solid black; padding: 2px;"></span>	
(c) TOTAL Independent Expenditures .....				<span style="border: 1px solid black; padding: 2px;"></span>	
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 <i>Savado, Ismael, , ,</i>			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 06 / 2018		

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 303 OF 313  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>ColorOfChange PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00428557							
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>											
Full Name of Payee <input type="checkbox"/> Memo Item <b>ColorOfChange.org</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 22 / 2018							
Mailing Address 1714 Franklin St # 100-136				Amount <span style="border: 1px solid black; padding: 2px;">293.87</span>							
City Oakland		State CA		Zip Code 94612-3488							
Purpose of Expenditure Canvassing Services				Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>							
Name of Federal Candidate: Rosen, Jacky, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: NV							
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">5044.02</span>				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 <b>ColorOfChange.org</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 22 / 2018							
Mailing Address 1714 Franklin St # 100-136				Amount <span style="border: 1px solid black; padding: 2px;">374.41</span>							
City Oakland		State CA		Zip Code 94612-3488							
Purpose of Expenditure Canvassing Services				Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>							
Name of Federal Candidate: Nelson, Bill, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: FL							
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">7519.47</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____							
<table style="width:100%;"> <tr> <td style="width:60%;">(a) SUBTOTAL of Itemized Independent Expenditures .....</td> <td style="width:40%; text-align: right;"><span style="border: 1px solid black; padding: 2px;">668.28</span></td> </tr> <tr> <td>(b) SUBTOTAL of Unitemized Independent Expenditures.....</td> <td style="text-align: right;"><span style="border: 1px solid black; padding: 2px;"> </span></td> </tr> <tr> <td>(c) TOTAL Independent Expenditures .....</td> <td style="text-align: right;"><span style="border: 1px solid black; padding: 2px;"> </span></td> </tr> </table>						(a) SUBTOTAL of Itemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;">668.28</span>	(b) SUBTOTAL of Unitemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"> </span>	(c) TOTAL Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>
(a) SUBTOTAL of Itemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;">668.28</span>										
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"> </span>										
(c) TOTAL Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>										
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.											
Signature <u>Savado, Ismael, , ,</u>				Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 06 / 2018							

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 304 OF 313  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>ColorOfChange PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00428557	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>ColorOfChange.org</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 23 / 2018		
Mailing Address 1714 Franklin St # 100-136			Amount <span style="border: 1px solid black; padding: 2px;">405.61</span>		
City Oakland	State CA	Zip Code 94612-3488	Transaction ID : VTQ0M9V78D0		
Purpose of Expenditure Canvassing Services		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 23 / 2018		
Name of Federal Candidate: Nelson, Bill, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: FL		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">7519.47</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>ColorOfChange.org</b> <input type="checkbox"/> Memo Item Non-Contribution Account			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 24 / 2018		
Mailing Address 1714 Franklin St # 100-136			Amount <span style="border: 1px solid black; padding: 2px;">421.21</span>		
City Oakland	State CA	Zip Code 94612-3488	Transaction ID : VTQ0M9VBCT2		
Purpose of Expenditure Canvassing Services		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 24 / 2018		
Name of Federal Candidate: Nelson, Bill, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: FL		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">7519.47</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">826.82</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
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  Savado, Ismael, , ,		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 06 / 2018	



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 305 OF 313  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>ColorOfChange PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00428557	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>					
Full Name of Payee <b>ColorOfChange.org</b> Non-Contribution Account <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 24 / 2018		
Mailing Address 1714 Franklin St # 100-136			Amount <span style="border: 1px solid black; padding: 2px;">328.48</span>		
City Oakland	State CA	Zip Code 94612-3488	Transaction ID : VTQ0M9VBD23 Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 24 / 2018		
Purpose of Expenditure Canvassing Services		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>			
Name of Federal Candidate: Rosen, Jacky, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> District: _____ State: NV		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">5044.02</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>ColorOfChange.org</b> Non-Contribution Account <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 25 / 2018		
Mailing Address 1714 Franklin St # 100-136			Amount <span style="border: 1px solid black; padding: 2px;">438.68</span>		
City Oakland	State CA	Zip Code 94612-3488	Transaction ID : VTQ0M9VBCV9 Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 25 / 2018		
Purpose of Expenditure Canvassing Services		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>			
Name of Federal Candidate: Nelson, Bill, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> District: _____ State: FL		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">7519.47</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">767.16</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
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  Savado, Ismael, , ,		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 06 / 2018	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 306 OF 313  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>ColorOfChange PAC</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00428557       </div>										
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <b>▶</b> New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>														
Full Name of Payee <input type="checkbox"/> Memo Item <b>ColorOfChange.org</b> Non-Contribution Account				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 25 / 2018										
Mailing Address 1714 Franklin St # 100-136				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">392.75</div>										
City Oakland		State CA		Zip Code 94612-3488										
Purpose of Expenditure Canvassing Services				Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>										
Name of Federal Candidate: Rosen, Jacky, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President    State: NV										
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: inline-block;">5044.02</span>				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 <b>ColorOfChange.org</b> Non-Contribution Account				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 26 / 2018										
Mailing Address 1714 Franklin St # 100-136				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">438.68</div>										
City Oakland		State CA		Zip Code 94612-3488										
Purpose of Expenditure Canvassing Services				Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>										
Name of Federal Candidate: Nelson, Bill, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President    State: FL										
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: inline-block;">7519.47</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____										
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">(a) SUBTOTAL of Itemized Independent Expenditures .....</td> <td style="width: 5%; text-align: center;">▶</td> <td style="width: 35%; border: 1px solid black; padding: 2px; text-align: right;">831.43</td> </tr> <tr> <td>(b) SUBTOTAL of Unitemized Independent Expenditures.....</td> <td style="text-align: center;">▶</td> <td style="border: 1px solid black; padding: 2px; text-align: right;"> </td> </tr> <tr> <td>(c) TOTAL Independent Expenditures .....</td> <td style="text-align: center;">▶</td> <td style="border: 1px solid black; padding: 2px; text-align: right;"> </td> </tr> </table>						(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	831.43	(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶		(c) TOTAL Independent Expenditures .....	▶	
(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	831.43												
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶													
(c) TOTAL Independent Expenditures .....	▶													
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.														
Signature <u>Savado, Ismael, , ,</u>				Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 06 / 2018										

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 307 OF 313  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>ColorOfChange PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00428557	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>ColorOfChange.org</b> Non-Contribution Account <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 26 / 2018		
Mailing Address 1714 Franklin St # 100-136			Amount <span style="border: 1px solid black; padding: 2px;">328.48</span>		
City Oakland	State CA	Zip Code 94612-3488	Transaction ID : VTQ0M9VBD49 Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 26 / 2018		
Purpose of Expenditure Canvassing Services		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>			
Name of Federal Candidate: Rosen, Jacky, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: NV		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">5044.02</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>ColorOfChange.org</b> Non-Contribution Account <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 27 / 2018		
Mailing Address 1714 Franklin St # 100-136			Amount <span style="border: 1px solid black; padding: 2px;">374.41</span>		
City Oakland	State CA	Zip Code 94612-3488	Transaction ID : VTQ0M9VBCZ1 Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 27 / 2018		
Purpose of Expenditure Canvassing Services		Category/ Type <span style="border: 1px solid black; padding: 2px;">004</span>			
Name of Federal Candidate: Nelson, Bill, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: FL		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">7519.47</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">702.89</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"></span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>		
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  Savado, Ismael, , ,		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 06 / 2018	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 308 OF 313  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>ColorOfChange PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00428557										
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <b>▶</b> New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>														
Full Name of Payee <input type="checkbox"/> Memo Item <b>ColorOfChange.org</b> Non-Contribution Account				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 27 / 2018										
Mailing Address 1714 Franklin St # 100-136				Amount <span style="border: 1px solid black; padding: 2px;">328.48</span>										
City Oakland		State CA		Zip Code 94612-3488										
Purpose of Expenditure Canvassing Services				Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>										
Name of Federal Candidate: Rosen, Jacky, , ,				Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: NV										
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">5044.02</span>				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 <b>ColorOfChange.org</b> Non-Contribution Account				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 28 / 2018										
Mailing Address 1714 Franklin St # 100-136				Amount <span style="border: 1px solid black; padding: 2px;">374.41</span>										
City Oakland		State CA		Zip Code 94612-3488										
Purpose of Expenditure Canvassing Services				Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>										
Name of Federal Candidate: Nelson, Bill, , ,				Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: FL										
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">7519.47</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶										
<table style="width:100%;"> <tr> <td style="width:60%;">(a) SUBTOTAL of Itemized Independent Expenditures .....</td> <td style="width:5%; text-align: center;">▶</td> <td style="width:35%; border: 1px solid black; padding: 2px;">702.89</td> </tr> <tr> <td>(b) SUBTOTAL of Unitemized Independent Expenditures.....</td> <td style="text-align: center;">▶</td> <td style="border: 1px solid black; padding: 2px;"></td> </tr> <tr> <td>(c) TOTAL Independent Expenditures .....</td> <td style="text-align: center;">▶</td> <td style="border: 1px solid black; padding: 2px;"></td> </tr> </table>						(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	702.89	(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶		(c) TOTAL Independent Expenditures .....	▶	
(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	702.89												
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶													
(c) TOTAL Independent Expenditures .....	▶													
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.														
Signature <u>Savado, Ismael, , ,</u>				Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 06 / 2018										

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 309 OF 313  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>ColorOfChange PAC</b>		<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00428557       </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on	
Full Name of Payee <input type="checkbox"/> Memo Item <b>ColorOfChange.org</b> Non-Contribution Account		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> <div style="border: 1px solid black; padding: 2px;">10 / 28 / 2018</div> </div>	
Mailing Address 1714 Franklin St # 100-136		Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> <div style="border: 1px solid black; padding: 2px;">328.48</div> </div>	
City Oakland	State CA	Zip Code 94612-3488	<b>Transaction ID : VTQ0M9VBD72</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> <div style="border: 1px solid black; padding: 2px;">10 / 28 / 2018</div> </div>
Purpose of Expenditure Canvassing Services		Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>	
Name of Federal Candidate: Rosen, Jacky, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		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 <b>ColorOfChange.org</b>		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> <div style="border: 1px solid black; padding: 2px;">10 / 31 / 2018</div> </div>	
Mailing Address 1714 Franklin St # 100-136		Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> <div style="border: 1px solid black; padding: 2px;">531.34</div> </div>	
City Oakland	State CA	Zip Code 94612-3488	<b>Transaction ID : VTQ0M9VCHA4</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> <div style="border: 1px solid black; padding: 2px;">10 / 31 / 2018</div> </div>
Purpose of Expenditure Canvassing Services		Category/Type <div style="border: 1px solid black; padding: 2px;">004</div>	
Name of Federal Candidate: Nelson, Bill, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify)	
<b>(a) SUBTOTAL of Itemized Independent Expenditures .....</b>		<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> <div style="border: 1px solid black; padding: 2px;">859.82</div> </div>	
<b>(b) SUBTOTAL of Unitemized Independent Expenditures.....</b>		<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> <div style="border: 1px solid black; padding: 2px;"></div> </div>	
<b>(c) TOTAL Independent Expenditures .....</b>		<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> <div style="border: 1px solid black; padding: 2px;"></div> </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.			
Signature Savadogo, Ismael, , ,		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> <div style="border: 1px solid black; padding: 2px;">12 / 06 / 2018</div> </div>	

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**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 310 OF 313  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>ColorOfChange PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00428557							
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>											
Full Name of Payee <input type="checkbox"/> Memo Item <b>ColorOfChange.org</b>				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 01 / 2018							
Mailing Address 1714 Franklin St # 100-136				Amount <span style="border: 1px solid black; padding: 2px;">531.34</span>							
City Oakland		State CA		Zip Code 94612-3488							
Purpose of Expenditure Canvassing Services				Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>							
Name of Federal Candidate: Nelson, Bill, , ,				Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <u>FL</u>							
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">7519.47</span>				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 <b>ColorOfChange.org</b> Non-Contribution Account				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 11 / 01 / 2018							
Mailing Address 1714 Franklin St # 100-136				Amount <span style="border: 1px solid black; padding: 2px;">388.04</span>							
City Oakland		State CA		Zip Code 94612-3488							
Purpose of Expenditure Canvassing Services				Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>							
Name of Federal Candidate: Rosen, Jacky, , ,				Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <u>NV</u>							
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">5044.02</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶							
<table style="width:100%;"> <tr> <td style="width:60%;">(a) SUBTOTAL of Itemized Independent Expenditures .....</td> <td style="width:40%; text-align: right;">▶ <span style="border: 1px solid black; padding: 2px;">919.38</span></td> </tr> <tr> <td>(b) SUBTOTAL of Unitemized Independent Expenditures.....</td> <td style="text-align: right;">▶ <span style="border: 1px solid black; padding: 2px;"></span></td> </tr> <tr> <td>(c) TOTAL Independent Expenditures .....</td> <td style="text-align: right;">▶ <span style="border: 1px solid black; padding: 2px;"></span></td> </tr> </table>						(a) SUBTOTAL of Itemized Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;">919.38</span>	(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶ <span style="border: 1px solid black; padding: 2px;"></span>	(c) TOTAL Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;"></span>
(a) SUBTOTAL of Itemized Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;">919.38</span>										
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶ <span style="border: 1px solid black; padding: 2px;"></span>										
(c) TOTAL Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px;"></span>										
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.											
Signature <u>Savado, Ismael, , ,</u>				Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 12 / 06 / 2018							

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 311 OF 313  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>ColorOfChange PAC</b>				<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00428557       </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <b>▶</b> New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>					
Full Name of Payee <input type="checkbox"/> Memo Item <b>ColorOfChange.org</b> Non-Contribution Account				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 11 / 02 / 2018	
Mailing Address 1714 Franklin St # 100-136				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">500.15</div>	
City Oakland		State CA		Zip Code 94612-3488	
Purpose of Expenditure Canvassing Services				Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: Nelson, Bill, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President    State: <u>FL</u>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: inline-block;">7519.47</span>				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 <b>ColorOfChange.org</b> Non-Contribution Account				Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 11 / 02 / 2018	
Mailing Address 1714 Franklin St # 100-136				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">328.48</div>	
City Oakland		State CA		Zip Code 94612-3488	
Purpose of Expenditure Canvassing Services				Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: Rosen, Jacky, , ,				<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President    State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: inline-block;">5044.02</span>				Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____	
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">828.63</div> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> <b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 60%;"> <b>(c) TOTAL</b> Independent Expenditures .....         </div> <div style="width: 35%; text-align: right;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> </div> </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.					
Signature <u>Savado, Ismael, , ,</u>				Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 12 / 06 / 2018	

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>ColorOfChange PAC</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00428557	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="font-size: 2em; color: gray;">➤</span> New report Amends report filed on				<div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid gray; padding: 2px;">M M M</div> <div style="border: 1px solid gray; padding: 2px;">D D D</div> <div style="border: 1px solid gray; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Full Name of Payee <b>ColorOfChange.org</b> Non-Contribution Account <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid gray; padding: 2px;">M M M</div> <div style="border: 1px solid gray; padding: 2px;">D D D</div> <div style="border: 1px solid gray; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address 1714 Franklin St # 100-136			Amount <div style="border: 1px solid gray; padding: 2px; text-align: right;">374.41</div>		
City Oakland	State CA	Zip Code 94612-3488	Transaction ID : VTQ0M9VCWV1 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid gray; padding: 2px;">M M M</div> <div style="border: 1px solid gray; padding: 2px;">D D D</div> <div style="border: 1px solid gray; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Canvassing Services		Category/ Type 004			
Name of Federal Candidate: Nelson, Bill, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: FL		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid gray; padding: 2px; text-align: right;">7519.47</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee <b>ColorOfChange.org</b> Non-Contribution Account <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid gray; padding: 2px;">M M M</div> <div style="border: 1px solid gray; padding: 2px;">D D D</div> <div style="border: 1px solid gray; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Mailing Address 1714 Franklin St # 100-136			Amount <div style="border: 1px solid gray; padding: 2px; text-align: right;">328.48</div>		
City Oakland	State CA	Zip Code 94612-3488	Transaction ID : VTQ0M9VCWW9 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid gray; padding: 2px;">M M M</div> <div style="border: 1px solid gray; padding: 2px;">D D D</div> <div style="border: 1px solid gray; padding: 2px;">Y Y Y Y Y Y</div> </div>		
Purpose of Expenditure Canvassing Services		Category/ Type 004			
Name of Federal Candidate: Rosen, Jacky, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid gray; padding: 2px; text-align: right;">5044.02</div>	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 gray; padding: 2px; text-align: right;">702.89</div>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<div style="border: 1px solid gray; padding: 2px; text-align: right;"> </div>		
(c) TOTAL Independent Expenditures .....			<div style="border: 1px solid gray; padding: 2px; text-align: right;"> </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.					
Signature  Savado, Ismael, , ,		[Electronically Filed]		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid gray; padding: 2px;">M M M</div> <div style="border: 1px solid gray; padding: 2px;">D D D</div> <div style="border: 1px solid gray; padding: 2px;">Y Y Y Y Y Y</div> </div>	



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 313 OF 313  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>ColorOfChange PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 5px;">C</span> <span>C00428557</span> </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	

Full Name of Payee <span style="float: right;"><input checked="" type="checkbox"/> Memo Item</span> <b>Facebook</b> * Non-Contribution Account			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Mailing Address 1 Hacker Way			Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">240.13</div>	
City Menlo Park	State CA	Zip Code 94025-1456	<b>Transaction ID : VTQ0M9VBD80</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Digital Advertising (PEX Card Transaction)		Category/ Type 004	<div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: Rosen, Jacky, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <span style="float: right;"><input checked="" type="checkbox"/> Memo Item</span> <b>Facebook</b> * Non-Contribution Account			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Mailing Address 1 Hacker Way			Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">109.13</div>	
City Menlo Park	State CA	Zip Code 94025-1456	<b>Transaction ID : VTQ0M9VCWZ2</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure Digital Advertising (PEX Card Transaction)		Category/ Type 004	<div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: Nelson, Bill, , ,			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: FL	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures .....	▶	10381.60

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.

Savado, Ismael, , ,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y Y

Signature