

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**
PROGRESSIVE CHOICES PAC

ADDRESS (number and street) P.O. BOX 58
Check if different than previously reported. (ACC) EVANSTON IL 60204

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00381806 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on M M M / D D D / Y Y Y Y Y Y in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period 08 / 01 / 2020 through 08 / 31 / 2020

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Lennon, Karen, , ,
Type or Print Name of Treasurer

Signature of Treasurer Lennon, Karen, , , [Electronically Filed] Date 09 / 12 / 2020

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

PROGRESSIVE CHOICES PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>	<input type="text" value=""/>	<input type="text" value="66029.91"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="98780.97"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="16000.00"/>	<input type="text" value="91500.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="114780.97"/>	<input type="text" value="157529.91"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="43553.55"/>	<input type="text" value="86302.49"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="71227.42"/>	<input type="text" value="71227.42"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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)

Write or Type Committee Name

PROGRESSIVE CHOICES PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	10000.00	62000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	10000.00	62000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	6000.00	29500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	16000.00	91500.00
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.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	16000.00	91500.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	16000.00	91500.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	553.55	2302.49
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	553.55	2302.49
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	43000.00	84000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
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)) ..	43553.55	86302.49
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	43553.55	86302.49

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)	16000.00	91500.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	16000.00	91500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	553.55	2302.49
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	553.55	2302.49

**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 6 OF 18
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
PROGRESSIVE CHOICES PAC

A. Little, Thomas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 260 E. Chestnut, No. 4302

City Chicago	State IL	Zip Code 60611
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Brandenburg Industrial Service Company	Occupation (for Individual) President
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 23 / 2020

Transaction ID : SA11AI.4529

Amount of Each Receipt this Period
5000.00

Memo Item
Conduit: ActBlue

B. Smith, Leo, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5348 N. Lakewood Avenue

City Chicago	State IL	Zip Code 60640
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Chicago Cred	Occupation (for Individual) Director Academics & Policy
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 23 / 2020

Transaction ID : SA11AI.4528

Amount of Each Receipt this Period
5000.00

Memo Item
Conduit: ActBlue

C.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	10000.00
TOTAL This Period (last page this line number only).....	10000.00

**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 7 OF 18
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

A. ACTBLUE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 441146

City SOMERVILLE	State MA	Zip Code 02144
FEC ID number of contributing federal political committee. C C00401224		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY
08 / 23 / 2020
Transaction ID : SA11C.4530

Amount of Each Receipt this Period
10000.00

Memo Item
Total Received Through Conduit This Reporting Period

B. American Association for Justice PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 777 6th Street NW Suite 200

City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee. C C00024521		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
08 / 04 / 2020
Transaction ID : SA11C.4532

Amount of Each Receipt this Period
5000.00

Memo Item

C. National Committee to Preserve Social Security and Medicare PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 10 G Street, NE Suite 600

City Washington	State DC	Zip Code 20002
FEC ID number of contributing federal political committee. C C00172296		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
08 / 27 / 2020
Transaction ID : SA11C.4531

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	6000.00
TOTAL This Period (last page this line number only).....	6000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

A. ActBlue Technical Services

Full Name (Last, First, Middle Initial)

Mailing Address 366 Summer Street

City Somerville State MA Zip Code 02144

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
08 / 23 / 2020

FEC Identification Number: C

Transaction ID : SB21B.4538

Amount of Each Disbursement this Period: 395.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	395.00
TOTAL This Period (last page this line number only).....▶	395.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

A. AMMAR CAMPA-NAJJAR FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 5429 MADISON AVENUE

M M M	/	D D D	/	Y Y Y Y Y
08		26		2020

City SACRAMENTO State CA Zip Code 95841

FEC Identification Number

Purpose of Disbursement Contribution

C	C00635888
---	-----------

Candidate Name
CAMPA-NAJJAR, AMMAR, , ,

Category/Type

Transaction ID : **SB23.4574**

Amount of Each Disbursement this Period

Office Sought: House Senate President
 Disbursement For: 2020 Primary General Other (specify) ▼
 State: CA District: 50

1000.00

Memo Item

B. BRINDISI FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 165

M M M	/	D D D	/	Y Y Y Y Y
08		07		2020

City UTICA State NY Zip Code 13503

FEC Identification Number

Purpose of Disbursement Contribution

C	C00648725
---	-----------

Candidate Name
BRINDISI, ANTHONY, , ,

Category/Type

Transaction ID : **SB23.4541**

Amount of Each Disbursement this Period

Office Sought: House Senate President
 Disbursement For: 2020 Primary General Other (specify) ▼
 State: NY District: 22

1000.00

Memo Item

C. BRINDISI FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 165

M M M	/	D D D	/	Y Y Y Y Y
08		26		2020

City UTICA State NY Zip Code 13503

FEC Identification Number

Purpose of Disbursement Contribution

C	C00648725
---	-----------

Candidate Name
BRINDISI, ANTHONY, , ,

Category/Type

Transaction ID : **SB23.4559**

Amount of Each Disbursement this Period

Office Sought: House Senate President
 Disbursement For: 2020 Primary General Other (specify) ▼
 State: NY District: 22

1000.00

Memo Item

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

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

3000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

A. CANDACE FOR 24

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 704027

City DALLAS State TX Zip Code 75370

Purpose of Disbursement Contribution

Candidate Name VALENZUELA, CANDACE, , ,

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: TX District: 24

Date of Disbursement: 08 / 26 / 2020

FEC Identification Number: C00702225
Transaction ID : SB23.4566
Amount of Each Disbursement this Period: 1000.00

Memo Item

B. CAROLYN FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 301

City SUWANEE State GA Zip Code 30024

Purpose of Disbursement Contribution

Candidate Name BOURDEAUX, CAROLYN, , ,

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: GA District: 07

Date of Disbursement: 08 / 26 / 2020

FEC Identification Number: C00649376
Transaction ID : SB23.4550
Amount of Each Disbursement this Period: 1000.00

Memo Item

C. CHRIS PAPPAS FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 313

City MANCHESTER State NH Zip Code 03105

Purpose of Disbursement Contribution

Candidate Name PAPPAS, CHRIS, , ,

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: NH District: 01

Date of Disbursement: 08 / 07 / 2020

FEC Identification Number: C00660464
Transaction ID : SB23.4542
Amount of Each Disbursement this Period: 1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3000.00

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 Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

A. CHRISTY SMITH FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address 777 S. FIGUEROA STREET
SUITE 4050

City LOS ANGELES State CA Zip Code 90017

Purpose of Disbursement
Contribution

Candidate Name
SMITH, CHRISTY, , ,

Office Sought: House Senate President
Disbursement For: 2000 Primary General Other (specify) ▼
State: CA District: 25

Date of Disbursement

MM / DD / YYYY
08 / 17 / 2020

FEC Identification Number

C C00725101

Transaction ID : SB23.4546

Amount of Each Disbursement this Period

1000.00

Memo Item

B. DCCC

Full Name (Last, First, Middle Initial)

Mailing Address 430 SOUTH CAPITOL STREET, SE
2ND FLOOR

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
Contribution

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2020

FEC Identification Number

C C00000935

Transaction ID : SB23.4539

Amount of Each Disbursement this Period

15000.00

Memo Item

C. DEBBIE FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 566442

City MIAMI State FL Zip Code 33256

Purpose of Disbursement
Contribution

Candidate Name
MUCARSEL-POWELL, DEBBIE, , ,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: FL District: 26

Date of Disbursement

MM / DD / YYYY
08 / 07 / 2020

FEC Identification Number

C C00652065

Transaction ID : SB23.4540

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

17000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

Full Name (Last, First, Middle Initial)
A. DEBBIE FOR CONGRESS

Mailing Address PO BOX 566442

City MIAMI State FL Zip Code 33256

Purpose of Disbursement Contribution

Candidate Name
MUCARSEL-POWELL, DEBBIE, , ,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: FL District: 26

Date of Disbursement

MM / DD / YYYY
08 / 26 / 2020

FEC Identification Number

C C00652065

Transaction ID : SB23.4549

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)
B. DEFAZIO FOR CONGRESS

Mailing Address PO BOX 1316

City SPRINGFIELD State OR Zip Code 97477

Purpose of Disbursement Contribution

Candidate Name
DEFAZIO, PETER A, , ,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: OR District: 04

Date of Disbursement

MM / DD / YYYY
08 / 26 / 2020

FEC Identification Number

C C00215905

Transaction ID : SB23.4570

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)
C. DEPASQUALE FOR PA 10

Mailing Address PO BOX 1822

City YORK State PA Zip Code 17405

Purpose of Disbursement Contribution

Candidate Name
DEPASQUALE, EUGENE, , ,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: PA District: 10

Date of Disbursement

MM / DD / YYYY
08 / 26 / 2020

FEC Identification Number

C C00710533

Transaction ID : SB23.4565

Amount of Each Disbursement this Period

1000.00

Memo Item

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

3000.00

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 Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

Full Name (Last, First, Middle Initial) A. DIANE FOR COLORADO CD3		Date of Disbursement MM / DD / YYYY 08 / 31 / 2020	
Mailing Address PO BOX 771606			
City STEAMBOAT SPRINGS	State CO	Zip Code 80477	
Purpose of Disbursement Contribution		Category/Type <input type="checkbox"/>	
Candidate Name MITSCH BUSH, DIANE, , ,			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CO District: 03	Amount of Each Disbursement this Period 1000.00		
		<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. EASTMAN FOR CONGRESS		Date of Disbursement MM / DD / YYYY 08 / 26 / 2020	
Mailing Address 16411 MARCY STREET			
City OMAHA	State NE	Zip Code 68118	
Purpose of Disbursement Contribution		Category/Type <input type="checkbox"/>	
Candidate Name EASTMAN, KARA, , ,			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: NE District: 02	Amount of Each Disbursement this Period 1000.00		
		<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. FINKENAUER FOR CONGRESS		Date of Disbursement MM / DD / YYYY 08 / 26 / 2020	
Mailing Address PO BOX 598			
City DUBUQUE	State IA	Zip Code 52004	
Purpose of Disbursement Contribution		Category/Type <input type="checkbox"/>	
Candidate Name FINKENAUER, ABBY, , ,			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: IA District: 01	Amount of Each Disbursement this Period 1000.00		
		<input type="checkbox"/> Memo Item	

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

A. FRIENDS OF DANA BALTER

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 2200 S. SALINA ST.
#701

M M M	/	D D D	/	Y Y Y Y Y
08		26		2020

City SYRACUSE State NY Zip Code 13205

FEC Identification Number

Purpose of Disbursement
Contribution

C	C00655183
---	-----------

Candidate Name
BALTER, DANA, , ,

Category/
Type

Transaction ID : SB23.4560

Amount of Each Disbursement this Period

Office Sought: House
 Senate
 President
State: NY District: 24

Disbursement For: 2020
 Primary General
 Other (specify) ▼

1000.00

Memo Item

B. GOROFF FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 215

M M M	/	D D D	/	Y Y Y Y Y
08		26		2020

City EAST SETAUKET State NY Zip Code 11733

FEC Identification Number

Purpose of Disbursement
Contribution

C	C00711564
---	-----------

Candidate Name
GOROFF, NANCY, , ,

Category/
Type

Transaction ID : SB23.4573

Amount of Each Disbursement this Period

Office Sought: House
 Senate
 President
State: NY District: 01

Disbursement For: 2020
 Primary General
 Other (specify) ▼

1000.00

Memo Item

C. HOOSIERS FOR HALE

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 40925

M M M	/	D D D	/	Y Y Y Y Y
08		26		2020

City INDIANAPOLIS State IN Zip Code 46240

FEC Identification Number

Purpose of Disbursement
Contribution

C	C00711887
---	-----------

Candidate Name
HALE, CHRISTINA, , ,

Category/
Type

Transaction ID : SB23.4554

Amount of Each Disbursement this Period

Office Sought: House
 Senate
 President
State: IN District: 05

Disbursement For: 2020
 Primary General
 Other (specify) ▼

1000.00

Memo Item

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

3000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

A. JACKIE GORDON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 456

M M M	/	D D D	/	Y Y Y Y Y
08		26		2020

City COPIAGUE State NY Zip Code 11726

FEC Identification Number

Purpose of Disbursement Contribution

C	C00706549
---	-----------

Candidate Name
GORDON, JACQUELINE, , ,

Category/Type

Transaction ID : SB23.4558

Amount of Each Disbursement this Period

Office Sought: House Senate President
 Disbursement For: 2020 Primary General Other (specify) ▼
 State: NY District: 02

1000.00

Memo Item

B. JON HOADLEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 51165

M M M	/	D D D	/	Y Y Y Y Y
08		26		2020

City KALAMAZOO State MI Zip Code 49005

FEC Identification Number

Purpose of Disbursement Contribution

C	C00701599
---	-----------

Candidate Name
HOADLEY, JON, , ,

Category/Type

Transaction ID : SB23.4577

Amount of Each Disbursement this Period

Office Sought: House Senate President
 Disbursement For: 2020 Primary General Other (specify) ▼
 State: MI District: 06

1000.00

Memo Item

C. KATE FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address P.O. BOX 413

M M M	/	D D D	/	Y Y Y Y Y
08		26		2020

City CINCINNATI State OH Zip Code 45201

FEC Identification Number

Purpose of Disbursement Contribution

C	C00711630
---	-----------

Candidate Name
SCHRODER, KATE, , ,

Category/Type

Transaction ID : SB23.4561

Amount of Each Disbursement this Period

Office Sought: House Senate President
 Disbursement For: 2020 Primary General Other (specify) ▼
 State: OH District: 01

1000.00

Memo Item

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

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

3000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

Full Name (Last, First, Middle Initial) A. KENDRA HORN FOR CONGRESS		Date of Disbursement MM / DD / YYYY 08 / 26 / 2020
Mailing Address PO BOX 54375		FEC Identification Number C 000648915 Transaction ID : SB23.4562
City OKLAHOMA CITY	State OK	Zip Code 73154
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name HORN, KENDRA, , ,		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: OK	District: 05	

Full Name (Last, First, Middle Initial) B. QUINN NYSTROM FOR CONGRESS		Date of Disbursement MM / DD / YYYY 08 / 07 / 2020
Mailing Address 422 LAUREL STREET, #161		FEC Identification Number C 000721498 Transaction ID : SB23.4543
City BRAINERD	State MN	Zip Code 56401
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name NYSTROM, QUINN REABE, , ,		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item
State: MN	District: 08	

Full Name (Last, First, Middle Initial) C. RITA HART FOR IOWA		Date of Disbursement MM / DD / YYYY 08 / 26 / 2020
Mailing Address PO BOX 333		FEC Identification Number C 000706457 Transaction ID : SB23.4553
City WHEATLAND	State IA	Zip Code 52777
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name HART, RITA, , ,		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: IA	District: 02	

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

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

3000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

A. SCHOLTEN FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 6233

City GRAND RAPIDS State MI Zip Code 49510

Purpose of Disbursement Contribution

Candidate Name
SCHOLTEN, HILLARY, , ,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼

State: MI District: 03

Date of Disbursement: 08 / 26 / 2020

FEC Identification Number: C00711317
Transaction ID : SB23.4555
Amount of Each Disbursement this Period: 1000.00

Memo Item

B. TJ COX FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 804

City SELMA State CA Zip Code 93662

Purpose of Disbursement Contribution

Candidate Name
COX, TERRANCE JOHN (TJ), , ,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼

State: CA District: 21

Date of Disbursement: 08 / 26 / 2020

FEC Identification Number: C00648956
Transaction ID : SB23.4548
Amount of Each Disbursement this Period: 1000.00

Memo Item

C. TOM O'HALLERAN FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 63992

City PHOENIX State AZ Zip Code 85082

Purpose of Disbursement Contribution

Candidate Name
O'HALLERAN, TOM, , ,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼

State: AZ District: 01

Date of Disbursement: 08 / 26 / 2020

FEC Identification Number: C00582890
Transaction ID : SB23.4547
Amount of Each Disbursement this Period: 1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3000.00

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 Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
PROGRESSIVE CHOICES PAC

A. WENDY DAVIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 3112 WINDSOR RD
STE A #525

M M M	/	D D D	/	Y Y Y Y Y
08		26		2020

City AUSTIN State TX Zip Code 78703

FEC Identification Number

Purpose of Disbursement
Contribution

C	C00713297
---	-----------

Candidate Name
DAVIS, WENDY, , ,

Category/
Type

Transaction ID : SB23.4569

Amount of Each Disbursement this Period

Office Sought: House
 Senate
 President
State: TX District: 21

Disbursement For: 2020
 Primary General
 Other (specify) ▼

Amount of Each Disbursement this Period	1000.00
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Memo Item

B. XOCHITL FOR NEW MEXICO

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 2250

M M M	/	D D D	/	Y Y Y Y Y
08		26		2020

City LAS CRUCES State NM Zip Code 88004

FEC Identification Number

Purpose of Disbursement
Contribution

C	C00666149
---	-----------

Candidate Name
TORRES SMALL, XOCHITL, , ,

Category/
Type

Transaction ID : SB23.4557

Amount of Each Disbursement this Period

Office Sought: House
 Senate
 President
State: NM District: 02

Disbursement For: 2020
 Primary General
 Other (specify) ▼

Amount of Each Disbursement this Period	1000.00
---	---------

Memo Item

C.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

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

City State Zip Code

FEC Identification Number

Purpose of Disbursement

C	
---	--

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Amount of Each Disbursement this Period	
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Memo Item

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

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

2000.00

43000.00
